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ABSTRACT

This guide is designed to provide Head Start managers with the skills and knowledge needed to plan and implement integrated services for children with disabilities and their families. Module 1, "Identifying Shared Responsibilities," assists participants in identifying how current roles and collaboration practices as a team affect children with disabilities and their families and describes the critical points where coordination among managers must take place. Module 2, "A Look at ADA and 504," explains the laws that govern disabilities services in Head Start. This module equips management teams to evaluate facilities and services and to identify strategies for reasonable accommodation. It also addresses ways to adapt employment practices to reflect the rights and protections afforded to employees with disabilities. Module 3, "Collaborating with LEAs," provides participants with information and tools to improve relationships with local education agencies (LEAs) and other community organizations and to ensure quality services to children with disabilities and their families. The guide also includes a section on continuing professional development, which offers participants strategies to apply new skills and extend their learning. A list of print and audiovisual materials and organizations is included. (CR)

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HEAD START®

Leading the Way: Disabilities Services and the Management Team

Training Guides for the Head Start Learning Community

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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Preface

Yvonne Lacy has been a Head Start director for more than 20 years. During those years, she has seen a number of changes, the biggest of which is the relationship between her program and the local education agency (LEA). "For years, we simply weren't seen as equals," Yvonne says. "Head Start was not regarded as part of the education system."

When Laura Clark become the LEA's special education director, they met to discuss provision of services to preschool children with disabilities. From the start, Yvonne and Laura made a commitment to work together, and together they grappled with tough questions: "What are our goals, and how can we work together to reach those goals?"

Laura reflects, "We were two administrators from two different programs, each trying very hard to meet the needs of children." Together, Laura and Yvonne tried different models of collaboration. First, the LEA hired a special education person to supervise the provision of services to children with disabilities. That failed. Then they tried a self-contained classroom. That was even worse. After observing children in the self-contained classroom who rarely interacted with each other or with staff, Yvonne approached Laura. Yvonne had an idea. She suggested they collaborate on an inclusive preschool program where children with disabilities played side by side with children who did not have disabilities, and Head Start teachers worked side by side with LEA teachers and specialists.

Laura agreed, but there was resistance. LEA specialists felt this new model would get in the way of meeting their primary goals: serving children with disabilities. Head Start staff felt they didn't have adequate training to work with children with significant disabilities, and they were concerned about working with highly trained and certified LEA staff. Would there be turf battles? Would the specialists try to take over the classroom? Parents from both sides also expressed concerns. Would their children really get what they needed in an inclusive classroom?

But Yvonne and Laura insisted on trying. They talked continually with staff and with families about their concerns and their questions. Together, they talked about their fears, about the future, and about the importance of moving forward, despite the concerns.

And they did move forward. Because of the program, now in operation for three years, children are thriving and staff from different backgrounds have opportunities to learn from each other. Launching a program with administrators who have different mandates, guidelines, agendas, and priorities has not been easy. What kept them going, despite the difficulties? They had a common goal. "We needed each other," say Yvonne and Laura. "We needed to come together, to achieve common ground, a common voice. We had to reach out to each other to achieve our vision, to help all children grow and learn."

Preface

The true story on the previous page illustrates the importance of working collaboratively to provide the best services for children with disabilities and their families. As most people who have developed collaborative relationships realize, leadership from the top is key to making them work. Managers must believe in the effort, make it a priority, and model it for staff.

While the disabilities services manager has a unique role in leading the effort, all Head Start managers must have a common vision of quality disabilities services, understand their role and responsibility in creating an inclusive program, and be knowledgeable about the regulations and laws that affect it.

That is the purpose of this guide: to provide all Head Start managers with the skills and knowledge needed to plan and implement integrated services for children with disabilities and their families. This includes managers who have just begun to take a critical look at their program's disabilities services and teams that have considerable experience. This guide will help managers develop a broader view of their roles and set the stage for developing a more collaborative and coordinated way of working with each other, with LEAs, and with other community agencies.

Each program will need one key person to coordinate this effort. Each program will also need to make decisions about which internal and outside people are best suited to lead specific activities. Most of the activities in this guide can be conducted by internal staff. In fact, we recommend that managers take turns leading activities. Sharing the role of facilitator will underscore the responsibility that *all* managers have to ensure that children with disabilities and their families receive the services they are guaranteed. Because of the technical and evolving nature of the content of Module 2: A Look at ADA and 504, we do recommend inviting a consultant knowledgeable about the laws to lead these activities. The Disability and Businesses Technical Assistance Center (see the Resources section) can offer suggestions for qualified low-cost trainers.

This technical guide is one of a series that includes the foundation guide written for all Head Start staff, parents, and consultants: *Setting the Stage: Including Children with Disabilities in Head Start.* We hope that these materials will strengthen Head Start's capacity to reach and include children with disabilities and their families.

Preface

edges the work of the DSM to date, using the DSM to highlight strengths of the program's existing services and to suggest areas that need improvement. In this way, the training will support the DSM as a key contributor to the improved vision of and blueprint for disabilities services, but will acknowledge the role of all managers as well.

Performance Standards

This guide applies Head Start core values as well as the Head Start Program Performance Standards, including, but not limited to, the Performance Standards on Services for Children with Disabilities. These standards require that all Head Start managers play an active role in including children with disabilities and their families.

Organization of the Guide

This guide contains the following sections:

Module 1: Identifying Shared Responsibilities helps participants identify how their current roles and collaboration practices as a team affect children with disabilities and their families, and the critical points where coordination among members of the management team must take place.

Module 2: A Look at ADA and 504 explains the laws that govern disabilities services policy and practice in Head Start. This module equips management teams to evaluate facilities and services and identify strategies for reasonable accommodation. It also addresses ways to adapt employment practices so that they reflect the rights and protections afforded to employees with disabilities.

Module 3: Collaborating with LEAs provides participants with information and tools to improve relationships with LEAs and other community organizations, to ensure quality services to children with disabilities and their families.

Continuing Professional Development offers participants strategies to apply new skills and extend their learning.

Resources lists print and audiovisual materials and organizations that managers can use to learn more about key issues

Organization of the Modules

In order to accommodate the needs of different grantees, each module offers two different delivery strategies. Workshops are suitable for

Overview

Purpose

In 1972, Head Start began to reserve at least 10 percent of its enrollment for children with disabilities. In the years since, Head Start has become the nation's largest community-based program providing services to children with disabilities and their families. Head Start has defined a set of principles that are the foundation for Head Start services to children with disabilities and their families. These principles are:

- to provide a full Head Start program to children with disabilities
- to serve the children in the least restrictive environment
- to provide the special services needed to support parents and other family members
- to establish cooperative agreements with public schools

As with all Head Start services, a primary and ongoing principle calls for programs to involve parents as co-decisionmakers in choosing services for their children.

Disabilities services managers (DSMs) have taken the lead in defining plans for children and providing access to services and resources. At the same time, just as Head Start programs have needed to work in more formal ways with schools, DSMs find they need to work in more connected and organized ways with the other members of their management team. This guide seeks to help programs achieve that goal.

Audience

This guide will provide Head Start management teams with the skills, information, and tools they need to accomplish the following goals:

- plan and implement integrated services for children with disabilities and their families
- plan and implement policies and practices that protect the rights of all persons with disabilities
- work across areas to create or enhance their disabilities services plan (DSP)

The training approach builds on the assumption that the DSM will be a participant in the training, and also a special resource to the team, whether officially designated as the trainer-in-charge or not. This design acknowl-

groups of four to six management team members. Workshops can build strong site-based teams as well as help staff from multiple sites develop a program-wide identity. Coaching sessions are designed to help seasoned managers orient new managers, and provide individual flexibility and one-on-one mentoring opportunities.

Each module, organized so that facilitators can implement the activities with ease, contains the following sections:

- The *Outcomes* section summarizes what skills participants will learn as a result of the experience.
- The *Key Concepts* section provides a description of the main ideas addressed in the module.
- The *Background Information* section provides a rationale for the modules and describes the critical issues addressed.
- The *Activities* section provides workshop or coaching sessions with step-by-step instructions for trainers and coaches.
- The *Next Steps: Ideas to Extend Practice* section includes strategies to help managers apply what they have learned in the modules.

Each module is organized into specific workshop activities and coaching sessions. Some activities are supplemented by a Discussion Guide or Lecture Guide to help workshop leaders and coaches think through the key ideas of the session and anticipate possible responses of participants. Handouts appear at the end of each module.

Ideally, the modules should be used sequentially, since activities build on one another. Because the management team can not develop a vision for disabilities services in isolation, we recommend that prior to this training, the program use a tool to help Head Start staff, specialists, and families create a common vision for inclusion. The activity A Vision for Our Program, from the guide *Setting the Stage: Including Children with Disabilities in Head Start*, offers one way to accomplish this.

Given the pressing need for managers to know and understand the implications of this guide's content, managers should design the training to be of high intensity and short duration for optimal effect. For example, scheduling weekly or biweekly sessions over a four-month period is more suitable than meeting monthly over the course of a year or more.

Introduction

Definition of Icons

Coaching

A training strategy that fosters the development of skills through tailored instruction, demonstrations, practice, and feedback. The activities are written for a coach to work closely with one to three participants.

Workshops

A facilitated group training strategy that fosters the development of skills through activities which build on learning through group interaction. These activities are written for up to 25 participants working in small or large groups with one or two trainers.

Next Steps: Ideas to Extend Practice

Activities assigned by the trainer immediately following the completion of the module to help participants review key information, practice skills, and examine their progress toward expected outcomes of the module.

Continuing Professional Development

Follow-up activities for the program to support continued staff development in the regular use of the skills addressed in a particular training guide. It includes:

1. Opportunities tailored for the participant to continue building on the skills learned in the training.

2. Ways to identify new skills and knowledge needed to expand and/or complement these skills through opportunities in such areas as higher education, credentialing, or community educational programs.

At A Glance

Module	Activity	Time	Materials
Module 1: Identifying Shared Responsibilities	Activity 1-1: A Day in the Life (W) Participants explore how managers' decisions affect the day-to-day experiences of children with disabilities and their families.	45 minutes	Handout 1–Keezia's Story Easel, chart paper, markers, tape, legal-size paper, and stand to hold Handout 1
	Activity 1-2: Setting Program Goals for Disabilities Services (W) Participants establish specific goals for supporting all children, including those with disabilities.	75 minutes	Video–*Shining Bright** VCR and monitor Easel, chart paper, markers
	Activity 1-3: What's My Role? (C) Participants identify the role they play in delivering quality disabilities services for children and their families.	90 minutes	Video–*Shining Bright** VCR and monitor Head Start Program Performance Standards on Services for Children with Disabilities Next Steps: Ideas to Extend Practice

W = Workshop

C = Coaching

*Each Head Start grantee received one copy of this videotape with the initial mailing of this guide in 1997. For information about how to get a copy of the video, please see the Resources section, or call your regional Training and Technical Assistance (T/TA) provider.

Module	Activity	Time	Materials
Module 2: A Look at ADA and 504	Activity 2-1: What Does It Mean for Us? (W) Participants identify how ADA and Section 504 apply to program operations and practices.	75–90 minutes	Handout 2–The Law Handout 3–Dayne's Story Handout 4–Putting the Law into Practice Easel, chart paper, markers, and tape
	Activity 2-2: As Employers (W) Participants identify aspects of the law that influence employment practices.	75–90 minutes	Handout 5–Title I Handout 6–Opinion Survey Handout 7–Six Key Aspects of Title I of ADA Easel, chart paper, markers, and tape
	Activity 2-3: Let's Take a Look (W) Participants use a checklist to assess program accessibility using guidelines consistent with the law.	90–120 minutes	Appendix A–Checklist for Existing Facilities Easel, chart paper, markers, paper, pencils, and tape measures
	Activity 2-4: ADA: Individual Solutions (C) Participants discuss the implications of Title III of ADA and pinpoint strategies to eliminate barriers in their program.	90 minutes	Handout 2–The Law Handout 3–Dayne's Story Handout 4–Putting the Law into Practice Next Steps: Ideas to Extend Practice

W = Workshop

C = Coaching

Module	Activity	Time	Materials
Module 3: Collaborating with LEAs	Activity 3-1: Myths and Reality (W) Participants explore the common myths that LEAs and Head Start programs have about each other.	90 minutes	Handout 8–Head Start/ LEA Questionnaire Handout 9–Just the Facts Easel, chart paper, markers, and tape
	Activity 3-2: Procedural Safeguards (W) Participants identify their role in empowering and advocating for parents in their program.	90 minutes	Handout 10–Carmen and Jonathan Handout 11–Defining Family-Centered Support
	Activity 3-3: The Role of Head Start Staff in IEP Meetings (C) A coaching adaptation of Activity 3-2: Procedural Safeguards.	60–90 minutes	Handout 9–Just the Facts Handout 10–Carmen and Jonathan
	Activity 3-4: Images of Collaboration (W) Participants examine strategies for promoting collaboration between Head Start programs and LEAs.	90 minutes	Handout 12–Viewer's Guide Video–*Getting Together** VCR and monitor

W = Workshop

C = Coaching

*Each Head Start grantee received one copy of this videotape with the initial mailing of this guide in 1997. For information about how to get a copy of the video, please see the Resources section, or call your regional Training and Technical Assistance (T/TA) provider.

Module	Activity	Time	Materials
Module 3: Collaborating with LEAs (continued)	Activity 3-5: Getting Together (C) Participants assess their program's relationship with LEAs and identify their role in supporting this effort.	90 minutes	Handout 9–Just the Facts Handout 12–Viewer's Guide Handout 13–Topics for Formal Agreements Handout 14–Suggestions for Collaboration Next Steps: Ideas to Extend Practice Video–*Getting Together** VCR and monitor
	Activity 3-6: Taking Stock and Setting Priorities (W) Participants assess their current relationships with LEAs and set priorities for launching and strengthening their collaborative efforts.	90–120 minutes	Handout 13–Topics for Formal Agreements Handout 14–Suggestions for Collaboration Easel, chart paper, markers, and tape

W = Workshop

C = Coaching

*Each Head Start grantee received one copy of this videotape with the initial mailing of this guide in 1997. For information about how to get a copy of the video, please see the Resources section, or call your regional Training and Technical Assistance (T/TA) provider.

How to Use This Guide

As you prepare for the training, you will need to understand a few key assumptions:

- *Head Start Staff as Leaders of the Activities.* Head Start managers can take turns leading most of the activities. We recommend that you not automatically assign the role of leader to the Disabilities Services Manager (DSM). Sharing the role of facilitator will underscore the responsibility that all managers have to ensure that children with disabilities and their families receive the services they are guaranteed.

- *Involvement of Experts.* Because of the technical and evolving nature of the content of Module 2: A Look at ADA and 504, we recommend involving a consultant who is knowledgeable about the laws to lead these activities. If you are an outside trainer leading an activity, make sure you learn about the program and the audience for the activity ahead of time. In this way, you will be able to tailor sessions to the needs of the program and capitalize on its specific circumstances, strengths, and needs.

- *Coordination of Leaders.* Each program will need to decide which internal and outside people are best suited to lead specific activities. Each program will also need one key person to coordinate this effort.

The training approach also acknowledges that programs are at different stages in working out a comprehensive disabilities services plan. Some will not yet have a plan. Others will have a plan that is still a work in progress. Still others will have a completed plan that serves as the basis for its work. For all three, the training presented here offers benefits.

Introduction

Identifying Shared Responsibilities

Outcomes

After completing this module, participants will be able to:

- Recognize the respective and shared roles and responsibilities of team members in managing their Head Start program's services for children with disabilities and their families.
- Identify how their current roles and team collaboration practices can directly affect children with disabilities and their families.
- Identify critical points in the disabilities services practices of their program where coordination among members of the management team must take place.

Key Concepts

- The disabilities services manager (DSM) has a unique role in, but not the entire responsibility for, designing a disabilities services plan and providing support to children with disabilities and their families. All managers have collective responsibility.
- Clarifying the specific roles and responsibilities of management team members, and articulating their relationship to one another and to the DSM, improves the quality of services for all children and families in the program, including children with disabilities.

Background Information

A spirit of inclusion has affected the classroom and also the management structure of Head Start programs. Over the last 10 years, Head Start management teams have increased their efforts to provide leadership in the area of disabilities services and building an integrated service plan. Today, while the DSM may be the central manager charged with designing the plan and carrying it out, other members of the management team also contribute to the plan. Moreover, in the strongest programs, the plan specifies links to those who oversee other areas, identifying particular responsibilities that they will take.

This module focuses on the roles of all members of the management team. It seeks to increase participants' understanding about the relationship between disabilities services and the program as a whole. In particular, it seeks to foster professional self-assessment and personal self-awareness. Only by seeing themselves as capable of designing an improved plan for disabilities services will management teams be able to accomplish this important task.

For an overview of the activities in this module, see At A Glance on pp. 5-8.

Module 1

Activity 1-1: A Day in the Life*

Purpose: The purpose of this workshop activity is to engage participants personally and help them understand how managers' decisions affect the day-to-day experiences of children with disabilities and their families.

Preparation

Arrange for: Easel, chart paper, markers, tape, one legal-size piece of paper, and a stand to hold Handout 1–Keezia's Story

Duplicate: Handout 1–Keezia's Story (pp. 19-20): one copy

Leading the Activity

1. Explain that you will begin this activity by telling the story about Keezia, a Head Start child who has a physical disability.

> **Tip for the Trainer:**
>
> Keezia's story works best as a dramatic presentation, delivered slowly and with feeling. If you read the story a number of times on your own, and practice presenting it, you may find that you can deliver it without referring to the printed version more than once or twice. Pause after each segment of the story (marked on the page by an asterisk) and very slowly rip off a thin strip of paper from the sheet you are holding. Just let the strips of paper fall: letting them collect on the floor around you adds to the impact.
>
> If you feel uncomfortable with this approach, you can use a less dramatic method. Ask two participants to present the story as a reading. Give each a copy, and ask them to alternate as they read the paragraphs out loud. Then use the reading as a springboard for discussion.

2. Begin to read the story (propped on a stand, so you have your hands free). Hold the plain sheet of paper in one hand. Each time you come to an asterisk, tear off a thin strip of paper from the sheet you are holding.

3. At the end of the story, lead participants in a discussion, using the questions below as prompts. Focus on how managers' attitudes and decisions inform policy and practice.

   - Overall, what reactions did you have to Keezia's story?

*Adapted with permission from S. Simon. *I Am Lovable and Capable*. Chesterfield, MA: Values Press.

- What particular events triggered a diminished sense of well-being?
- In what ways do managers' decisions affect Keezia's Head Start experiences?
- What could managers do, in terms of setting policy, supervising staff, etc., to make Keezia's Head Start experiences more positive? To make Keezia's family's experiences more positive? (Think about all aspects of service delivery.)

Tip for the Trainer:

To help participants explore their own feelings and attitudes about inclusion, see the Discussion Guide in the activity My Point of View. This activity appears in the Disabilities Services foundation guide, *Setting the Stage: Including Children with Disabilities in Head Start.*

4. After the discussion about Keezia, ask participants to think about their own Head Start program. Ask:
   - Do children with disabilities experience events similar to those of Keezia?
   - What are you doing as individual managers to support children and families' sense of empowerment? As a management team?

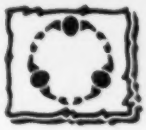
Summing Up

Summarize the session for participants by making the following key points:

- At strategic moments through the day, for a wide range of reasons, a child may "fall" from feeling fairly competent to feeling incompetent, misunderstood, frustrated, or rejected.
- Neither managers, nor teachers, nor home visitors can protect children from all the hurts or struggles they encounter. But it is the manager's job to understand how their actions (or lack of action) affect outcomes for children and families.

In promoting development with any child, it is important to know how to alter the situation to improve the child's chances for success. Improved practice grows out of a refined understanding about what the child needs and what the parent needs. It also stems from greater awareness of who, among all the staff, can be involved in addressing the need.

Activity 1-2: Setting Program Goals for Disabilities Services



Purpose: In this workshop activity, participants watch *Shining Bright*, a videotape that captures a Head Start program's experience developing an inclusive preschool program with their local school district. This video will be used as a springboard for helping participants set specific goals for supporting all Head Start children, including those with disabilities.

> **Trainer Preparation Note:**
>
> Because the management team cannot develop a vision for disabilities services in isolation, we recommend that prior to this training, the program use a tool to help Head Start teachers, specialists, and families create a common vision for inclusion. The activity, A Vision for Our Program, from the guide *Setting the Stage: Including Children with Disabilities in Head Start*, offers one way to accomplish this.

Preparation

Arrange for: Easel, chart paper, markers, VCR, monitor, and videotape *Shining Bright*

Preview: *Shining Bright* (30 minutes) at least twice. If you need to order a copy of this video, refer to the Resources section.

Leading the Activity

1. Introduce the videotape by explaining that it provides a "transportation-free" tour of another Head Start program, and a chance for participants to look into a program that is somewhat similar to their own, but not their own. This video serves as a case study that offers participants a chance to analyze some program elements and features with distance and objectivity. They can then apply this analysis to their own program.

2. View the videotape *Shining Bright*.

3. Facilitate a group discussion, using the questions that follow.

   - What similarities did you see between situations in the video and situations Keezia (from Activity 1-1: A Day in the Life) encountered?

- In the video, how did the Head Start program decide to foster more inclusive practices? What specific goals did the management team set?
- Who, within and outside the program, did the team members need to involve to reach their goals?
- What was the most challenging task they faced? How did they resolve it?

4. Next, tell participants that you would like to shift the focus to their own program. Ask them to brainstorm:
   - What do we do well as a team in our efforts to serve children with disabilities and their families?
   - What challenges do we still face?
   - What goals do we want to set for quality disabilities services?

   List 3 major goals for disabilities services on chart paper and save for the first Next Step in Module 3 (p. 64). These goals will be used to build a disabilities services plan (DSP).

5. With participants, discuss how the goals they identified in step 4 are similar to, or different from, the goals they have for all children in the program.

Summing Up

Summarize by pointing out that the video allowed participants to look into another classroom and analyze aspects of its program. Highlight key aspects of their program, as well as the goals they have generated.

Conclude by reminding managers that these goals can be used when they review and revise their disabilities services plan.

Activity 1-3: What's My Role?

Purpose: The Head Start Program Performance Standards on Services for Children with Disabilities mandate that disabilities services be a program-wide effort. This coaching session will offer new managers background information about inclusion and help them identify the role they play in delivering quality disabilities services for children and their families.

Preparation

This session has three parts: 1) viewing the videotape *Shining Bright*; 2) reviewing the Head Start Program Performance Standards on Services for Children with Disabilities, and 3) analyzing how the performance standards relate to their particular role and their program area. At the end of the session, participants will choose which Next Steps they will work on to extend their learning. To prepare for this session:

- Review all the directions and handouts for this session, the Head Start Program Performance Standards on Services for Children with Disabilities, and Next Steps: Ideas to Extend Practice.
- Arrange for a VCR, monitor, and the videotape *Shining Bright.*
- Preview *Shining Bright* (30 minutes) at least twice. If you need to order a copy of this video, refer to the Resources section.
- Obtain copies of the Head Start Program Performance Standards on Services for Children with Disabilities: one for each participant
- Duplicate Next Steps: Ideas to Extend Practice (p. 18): one for each participant

Conducting the Session

1. Welcome participants and briefly discuss the purpose of the session.
2. Introduce the videotape *Shining Bright* by explaining that it captures a Head Start program's experiences of including children with disabilities and their families.
3. View the videotape and discuss it with participants. Use the discussion to help participants identify the benefits of inclusion for children with disabilities, for typically developing children, for staff, and for families. Then focus the discussion on inclusion as a program-wide effort.

Tip for the Coach:

"Inclusion" may feel like an abstract concept for participants who have not had experience working in inclusive settings. You may wish to offer these participants some background information about inclusion, and concrete images of what it looks like across different program areas. The Introduction of the Disabilities Services foundation guide, *Setting the Stage: Including Children with Disabilities in Head Start* can help you provide participants with an overview of inclusion: what it is, and how it benefits children and families. You may also duplicate this section and use it as a handout.

4. Distribute the Head Start Program Performance Standards on Services for Children with Disabilities. Explain that these standards offer Head Start regulations and guidance for serving children with disabilities and their families. These standards also reinforce disabilities services as a program-wide effort. Ask participants to review these standards, focusing on those relating to their particular role within the program.

5. Discuss the standards with participants. Encourage participants to ask questions when they need clarification. Then use the standards to help participants identify their own roles and responsibilities in managing their program's services for children with disabilities and their families.

6. Ask participants to identify three steps they will take to enhance their contribution to quality disabilities services. Steps should be as a concrete as possible. Steps may involve, for example, coordinating with other managers or bringing the information "home" to their own staff and involving them in developing an action plan.

Wrap-Up and Next Steps

Briefly summarize the session with participants and highlight key points. Stress that including children with disabilities and their families can benefit the program as a whole. However, successful inclusion requires that everyone "own" inclusion and play a role in making it work.

Distribute and review Next Steps: Ideas to Extend Practice. Help participants choose the Next Step(s) they would like to pursue.

Next Steps: Ideas to Extend Practice

As the management team, there are ways you can extend what you have accomplished during these sessions, both as a team and with the entire staff. Ways to continue your work in this area include:

- Using Handout 1–Keezia's Story (pp. 19-20) as a preservice or inservice training activity with the entire staff, parents, and volunteers. This will engage participants personally, raise awareness, and help staff understand how their behavior affects the experience of children with disabilities.

- Inviting the DSM to give an overview of the required parts of the disabilities services plan (DSP) and an overview of the program's current plan. Emphasize that while the DSM has a unique role in designing a DSP and providing support to children with disabilities and their families, *all* managers have collective responsibility in this effort. Encourage group members to identify the parts of the DSP that are most relevant to their particular program area. Then, as a team, identify specific strategies each member can implement to enhance their contribution to quality disabilities services.

Handout 1: Keezia's Story

Keezia, a four-year-old Head Start child, walks to the car with her mother. Ever since her mom bought that used car, the program says Keezia can't ride the bus with the other kids. "Gotta hurry, honey," says Keezia's mother. Keezia tries to run, but her legs just get tangled up. When Keezia finally gets in the car, it won't start. Keezia's mother helps Keezia out of the car. "We have to walk and walk fast. If you make me late for work again, I'm not going to have any work to go to." *

By the time Keezia gets to school, it's 9:35 and all the other children are finishing breakfast. No one seems to notice her. *

The teacher doesn't greet Keezia. He heads straight for Keezia's mother instead. *

He's wearing that mad look. Keezia watches as he tells Keezia's mother that it's a bad idea to be late for school day after day. It's not good for Keezia, he says, and it's disruptive for the other children, too. He asks if Keezia has eaten breakfast this morning. Keezia's mother shakes her head "no." "You do know we can't serve breakfast after 9:30," he says. *

Keezia watches her mother quickly leave the classroom. She knows there won't be any good-bye hugs today. *

During free time, Keezia is told to play in the manipulative area. Keezia finds a puzzle with a fish on it. The puzzle is hard, so many pieces. She works on it for the longest time, trying pieces in lots of different holes, turning the pieces, looking at the shapes. How come it seems as if she is the only one who can't do puzzles? *

"Couldn't you get that puzzle together?" asks her teacher. "You know, we just don't have any easier ones." The teacher asks Philip to help Keezia with the fish. Philip groans. He's been working on his castle and he doesn't want to stop to work on some fish puzzle. But the teacher urges him, "Keezia can't do it without you." Keezia watches as Philip seems to move like lightning. *

Handout 1: Keezia's Story (page 2)

Now it's story time, Keezia's favorite time. She likes sitting on her carpet square, listening to the words, looking at the pictures. Sometimes she gets to sit on the teacher's lap. Today she sits next to her friend, Lila, and that's special, too. The teacher asks what story the class wants to hear. Keezia calls out *Goodnight Moon.* Everyone agrees.

Just when the teacher gets to the part about two little kittens and the pair of mittens, Mary, the occupational therapist, walks into the room. The teacher closes the book and tells Keezia to go with Mary so she can get her special help. *

When Keezia returns to the classroom, the kids are getting ready to play outside. There are only two Big Wheels and Keezia's really hoping that this time she'll get a turn. But she's too slow. By the time she gets outside, Lila and Philip are zooming in circles around her. *

Finally it is time to go home. Keezia wonders when her mother will get there. She waits inside, staring through the window. She starts to wave good-bye as the school bus rides away, but no one sees her. *

A Look at ADA and 504

Outcomes

After completing this module, participants will be able to:

- Recognize the implications of the Americans with Disabilities Act (ADA) or Section 504 of the Rehabilitation Act of 1973 for their program's operations.
- Evaluate the accessibility of their program's facilities and services for children and families and identify strategies for reasonable accommodation.
- Adapt employment practices so that they reflect the rights and protections afforded to persons with disabilities.

Key Concepts

- Head Start managers are responsible for ensuring that the program protects the rights of persons with disabilities.
- Managers must understand the basic provisions of ADA or Section 504 and how the law applies to their program's policies and practices.
- Head Start managers need to be able to identify and access the resources they will need as they follow the intent of the law.

Background Information

Head Start has been a pioneer in including children with disabilities, reaching and serving them before any federal educational mandates existed. Fortunately, laws and regulations related to the rights and protections of children and adults with disabilities have been enacted over the years.

The Civil Rights Act, passed in 1964, made discrimination on the basis of race, sex, religion, and national origin illegal. Since that time, people with disabilities and their supporters have worked to guarantee the civil rights of persons with disabilities as well. The Individuals with Disabilities Education Act (IDEA), which will be discussed in Module 3, affords children who were once excluded from public school systems the right to a free, appropriate, public education (FAPE) in the least restrictive environment (LRE).

Section 504 of the Rehabilitation Act of 1973, which prohibits discrimination on the basis of physical or mental disabilities, applies to every federally funded program or activity in the country. In 1990, Congress

reaffirmed and extended its mandate to ensure these protections by passing ADA. No longer is discrimination prohibited solely in federally funded programs; under ADA, privately owned businesses and facilities must also be accessible to persons with disabilities. ADA provides persons with disabilities the same basic civil rights guaranteed to other citizens.

What does ADA mean for Head Start programs? The implications of this landmark legislation are still evolving and strategies for following the letter and spirit of the law will not always be obvious or clear-cut. Head Start managers, however, need to understand the law and its implications for staff, program policies and operations, and the children and families they serve. Managers also need to know when and where to go for the help they will undoubtedly need as they work to ensure the rights of persons with disabilities.

For an overview of activities in this module, see At A Glance on pp. 5-8.

Activity 2-1: What Does It Mean for Us?

Purpose: This workshop activity will provide participants with an opportunity to learn about ADA and Section 504, and how those laws apply to typical program operations and practices.

Preparation

Trainer Selection: Select a trainer who has a sound understanding of ADA and Section 504. The Disability Businesses Technical Assistance Center (see the Resources section) or your regional Training and Technical Assistance (T/TA) provider can refer you to free or low-cost trainers who are experts.

Arrange for: Easel, chart paper, markers, and tape

Duplicate: Handout 2–The Law (pp. 36-38): one for each participant
Handout 3–Dayne's Story (pp. 39-40): one for each participant
Handout 4–Putting the Law into Practice (p. 41): one for each participant

Leading the Activity

1. Introduce the activity and review the agenda with participants. Remind managers that including children with disabilities is not just best practice, or only required by the Head Start Program Performance Standards on Services for Children with Disabilities. It is also the subject of federal law. As managers, they have the legal obligation to know and follow the laws and regulations that protect the rights of persons with disabilities. They also must ensure that their staff members do the same. Tell participants that this activity provides an overview of ADA and Section 504.

2. Hang three pieces of chart paper in the room. Write one of the following sentence stems on each piece of chart paper.

   - As a manager, I need to know more about the part of ADA (or 504) that deals with . . .
   - The implications of ADA (or 504) that frighten me most are . . .
   - As a manager, my biggest challenge related to complying with ADA (or 504) is . . .

3. Ask participants to move from one sheet of chart paper to another and complete each sentence stem individually.

4. When participants have completed this exercise, read the responses aloud, noting common themes and questions. Tell participants that the training session will be tailored to answer their questions and allay their fears, and direct them to resources that can help.

5. Use Handout 2–The Law to present a 20-minute overview to participants. Tell participants that at the end of the lecture they will receive the handout that covers all the information presented. Where appropriate, expand the lecture to address specific issues generated by the group and written on the chart paper earlier.

6. After the lecture, distribute a copy of Handout 2–The Law and give participants time to read it. When they have finished, give the group time to ask questions, or share comments and concerns. Record any unanswered questions on the chart paper for investigation after the session.

7. Distribute a copy of Handout 3–Dayne's Story to each participant. Explain that the scenario will be used as a tool for learning about some of the implications of Title III of ADA (or 504) for everyday practice.

8. Ask for a volunteer to read Handout 3–Dayne's Story aloud. Allow the group members 10 minutes to complete the handout individually.

> **Tip for the Trainer**:
>
> Point out that persons communicating with the assistance of a telephone relay system (TRS) operator, as they do in Dayne's Story, usually address each other directly, as in any other direct conversation. The operator acts simply as an "interpreter." Specific terms are used to mediate the conversation; for example, the phrase "Go Ahead" is used to signal that one person is done talking, so that the other person can then speak.

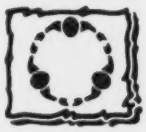
9. Lead a discussion with the managers for 10 to 15 minutes using their answers on Handout 3–Dayne's Story as a starting place. Use Handout 4–Putting the Law into Practice to help cover other key points. At the end of the discussion, distribute Handout 4 to participants.

10. Collect participants' written responses on Handout 3–Dayne's Story. These can be used again in the first Next Step of Module 3 (p. 64) as one of the tools for developing a disabilities services plan (DSP).

Summing Up

Remind participants that the road to compliance with ADA begins with an examination of attitudes as well as a thorough understanding of the law. Recognizing that everyone has a right to participate and make a contribution will help tremendously. By respecting the guaranteed rights of persons with disabilities, and working with them to make needed accommodations, the Head Start program will be taking steps to protect the rights of all.

*Activity 2-2: As Employers**



Purpose: Title I of ADA deals specifically with employment of persons with disabilities. This workshop activity will help managers review attitudes, practices, and legalities related to integrating persons with disabilities in the workplace.

Preparation

Trainer Selection: Select a trainer who has a sound understanding of Title I of ADA and Section 504. The Disability Businesses Technical Assistance Center (see the Resources section) or your regional Training and Technical Assistance (T/TA) provider can refer you to free or low-cost trainers who are ADA experts.

Arrange for: Easel, chart paper, markers, and tape

Duplicate: Handout 5–Title I (p. 42): one for each participant
Handout 6–Opinion Survey (p. 43): one for each participant
Handout 7–Six Key Aspects of Title I of ADA (p. 44): one for each participant

Invite: Other administrators from the parent or grantee organization (such as the Community Action Program (CAP), school system, or non-profit organization) who are responsible for hiring and supervising staff

Leading the Activity

1. Introduce the activity and review the agenda with participants. Tell managers that during this activity they will learn the basic concepts of Title I of ADA and how the concepts apply to their everyday practice as employers and supervisors.

2. Distribute Handout 5–Title I and review it with participants. Ask participants to jot down concerns or questions they may have.

3. Distribute Handout 6–Opinion Survey. Allow participants 5 minutes to complete the survey individually.

4. Distribute Handout 7–Six Key Aspects of Title I of ADA and briefly review it with participants.

*This activity has been adapted with permission from Barr Films. *Making the ADA Work for You: Discussion Leader's Guide*. 1992. Irwindale, CA.

5. Ask participants, as a group, to discuss each item on Handout 6–Opinion Survey. Tell participants they have 15 to 20 minutes to try to reach consensus on each item, and that you will not be involved in their discussion during that time.

6. Ask participants to share their results with you. Use the discussion guide below to help analyze each of the items.

   Close the discussion by asking the team to summarize main points. Highlight the importance of:

   - the need for confidentiality and protecting all employees' rights to privacy
   - well-thought-out job descriptions that identify essential functions of the job
   - the importance of using expert resources to better understand and follow the law and to make subsequent accommodations that work for all

Discussion Guide

Use the following points to guide the group's discussion about each item on Handout 6–Opinion Survey.

Item 1. We can decide *not* to hire a qualified teacher if she has a facial disfigurement that might frighten three and four year olds.

Aspects of the Law to Consider:

- essential functions
- customer and employee reactions

Guiding Questions:

- Is the person qualified to perform the essential functions of the job?
- Are the reactions of others a valid basis to refuse to hire someone?

Discussion Guide, continued

Item 2. We can decide *not* to hire a qualified family services worker if she uses a wheelchair and is therefore unable to make home visits.

Aspects of the Law to Consider:

- essential functions
- marginal functions
- reasonable accommodations

Guiding Questions:

- Is home visiting an essential or marginal function of the job?
- If essential, can a reasonable accommodation be made? For example, can this employee be assigned only those families who live in accessible buildings?
- If marginal, can this task be changed or reassigned to another worker?

Item 3. We can decide *not* to hire a qualified home visitor if she has a chronic back problem.

Aspects of the Law to Consider:

- essential functions
- marginal functions
- reasonable accommodations

Guiding Questions:

- Does a back injury interfere with an essential function of the job, or just a marginal one?
- If lifting is a marginal aspect of the job, can this task be changed or reassigned to someone else?
- If lifting is an essential aspect, can a reasonable accommodation be made?

Discussion Guide, continued

Item 4. We can decide *not* to hire a qualified cook if she is HIV positive.

Aspects of the Law to Consider:

- essential functions
- customer and employee reactions

Guiding Questions:

- Does her HIV status interfere with the essential functions of the job?
- Are the reactions of others a valid basis on which to decide to refuse to hire someone?

Item 5. Once we hire a person with a disability, we cannot give her negative feedback or we may be dealing with a lawsuit.

Aspects of the Law to Consider:

- effective supervision

Guiding Questions:

- Can an employer withhold effective supervision or negative feedback about performance in order to protect the feelings of the person, or protect themselves from a possible lawsuit?
- Does a person with a disability have the same right as other employees to receive feedback, choose to change behavior, and practice new skills?
- Will lack of feedback deny her the chance of improvement and advancement?

Discussion Guide, continued

Item 6. We can decide *not* to hire a qualified supervisor with severe asthma if all of our buildings are old and the air quality is not healthy for a person with asthma.

Aspects of the Law to Consider:

- essential functions
- reasonable accommodations
- undue hardships

Guiding Questions:

- Is being onsite an essential function of the job?
- If essential, can a reasonable accommodation be made? For example, can the supervisor move to an office with a window or air filter, or can structural improvements be made to improve the air quality for the supervisor?
- Will making structural changes create an undue hardship for the program?

Item 7. We are obliged to provide accommodations, even costly ones, if needed by a person with a disability. For example, if an administrative assistant develops multiple sclerosis and is no longer able to type consistently, we are obliged to buy a voice-activated word processing system so she can perform her tasks.

Aspects of the Law to Consider:

- essential functions
- reasonable accommodations
- undue hardships

Guiding Questions:

- Is typing an essential or marginal function of the job?
- Will obtaining a voice-activated system create an undue hardship for the program?

Discussion Guide, continued

- How can you find out what type of reasonable accommodations can be made?
- Have you spoken with her about other possible accommodations?
- Are you obliged to find another position for the employee in the organization if you cannot make a reasonable accommodation?

Item 8. We can decide *not* to hire a qualified janitor if we find out he has a past history of serious mental illness.

Aspects of the Law to Consider:

- essential functions
- customer and employee reactions

Guiding Questions:

- Can the person perform the essential functions of the job?
- Can you refuse to hire someone based on the negative reactions of others?

Summing Up

Remind participants that compliance with Title I of ADA is their legal obligation. Stress that success in complying with Title I will be driven by the managers' attitudes and respect for the intent of the law. Also remind participants that all children in the program will benefit from seeing adults with disabilities contributing fully.

Activity 2-3: Let's Take a Look

Purpose: This workshop activity will provide managers with tools to improve program compliance with those aspects of Title III of ADA relating to facilities. Participants will first use a checklist to assess program accessibility using guidelines consistent with the law. Then they will begin to develop a plan for a full assessment of facilities, along with steps needed for improvements.

Preparation

Trainer Selection:	Select a trainer who has a sound understanding of Title III of ADA and Section 504. The Disability Businesses Technical Assistance Center (see the Resources section) or your regional Training and Technical Assistance (T/TA) provider can refer you to free or low-cost trainers who are ADA experts.
Arrange for:	Easel, chart paper, markers, paper, pencils, and tape measures (one for each pair of participants)
Duplicate:	Appendix A–Checklist for Existing Facilities (p. A-1): one for each participant
Prepare:	Select sections from each of the 4 priority areas in Appendix A. Each section will be used for a mini-audit during this activity.

Leading the Activity

1. Introduce the activity and review the agenda with participants. Tell them that during the session they will learn more about Title III of ADA. This Title ensures that public accommodations provide persons with disabilities equal access to goods, services, and facilities. Public accommodations providing transportation must offer equivalent transportation to persons with disabilities as well. Explain that during this activity, participants will focus on facility accessibility.

2. Provide an overview of portions of Title III related to facilities. If needed, use or distribute Handout 2–The Law. Focus on four areas: accessible entrance to the facility, access to goods and services, access to rest rooms, and any other measures necessary to make facilities accessible.

3. Tell participants that they will spend the next 20 minutes conducting a mini-audit of the facility. Give each participant a copy of Appendix A–Checklist for Existing Facilities. Divide the group into pairs. Tell each pair the section of the checklist they should focus on (selected by you earlier).

4. Give each team a tape measure and agree on a time when all teams will return to the session to report their findings.

5. Reconvene the group and have each team report its findings. Ask managers to highlight what surprised them, what troubled them, and what possible solutions they can propose for problem areas.

6. Tell participants that this checklist details some of the requirements found in ADA Accessibility Guidelines (ADAAG) and that full compliance with ADAAG is required only for alterations and new construction. However, the checklist should also be used program-wide to help the team determine what barriers may be readily removed at their facilities, as well as to establish long-term goals for barrier removal.

7. Ask managers to spend the next 30 minutes developing a plan for fully assessing accessibility in all facilities and making improvements. The plan should include specifics, such as the names of the staff, ADA experts, parents, persons with disabilities, etc., who will be asked to help with the audit; when they will be asked, and by whom; the facilities each team will assess; a time frame for completing the audit; and a target date to review all findings.

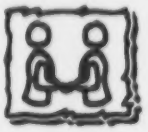
8. After the session, make a copy of the plan. It can be used again in the first Next Step of Module 3 (p. 64) as one of the tools for developing a disabilities services plan (DSP).

Summing Up

Remind participants that making facilities accessible is their legal obligation and that they can often remove barriers by making simple and relatively inexpensive changes.

The Department of Justice recommends the development of an Implementation Plan, specifying what improvements programs will make to remove barriers and when each solution will be carried out. Such a plan "could serve as evidence of a good faith effort to comply" with ADA.

Activity 2-4: ADA: Individual Solutions



Purpose: Title III of ADA (Places of Public Accommodation; Commercial Facilities) requires early childhood centers to ensure equal access to the facility and to the programs and services they provide. In this coaching session, participants will discuss the implications of Title III and pinpoint strategies they can use to eliminate barriers in their program. This session requires a coach who has a sound understanding of ADA and Section 504. The Disability Businesses Technical Assistance Center (see the Resources section) or your regional Training and Technical Assistance (T/TA) provider can refer you to free or low-cost trainers who are ADA experts.

Preparation

This session has two parts: 1) discussing the implications of Title III of ADA; and 2) identifying strategies for implementing Title III in participants' programs. At the end of the session, participants will select Next Steps to extend their learning. To prepare for this session:

- Review all the directions and handouts for this session.
- Duplicate Handout 2–The Law (pp. 36-38), Handout 3–Dayne's story (pp. 39-40), Handout 4–Putting the Law into Practice (p. 41), and Next Steps: Ideas to Extend Practice (p. 35): one for each participant.
- Ask participants to bring a description of one child with a disability, specifying the accommodations the program has made (or plans to make) to meet the child's individual needs. If this is not possible, complete only steps 1 through 4 below, or be prepared to provide a brief vignette from your own experiences about including a child with a significant disability in a preschool program.

Coach Preparation Note:

All families have a right to confidentiality. That is, information about Head Start children and families can only be shared within Head Start on a "need-to-know" basis. Before participants share their descriptions of children in the program, make sure they fully understand issues around confidentiality.

Conducting the Session

1. Welcome participants and briefly discuss the purpose of today's session. Remind participants that including children with disabilities is

not just best practice or only required by the Head Start Program Performance Standards on Services for Children with Disabilities. It is also the subject of federal law. As managers, they have the legal obligation to know and follow the laws and regulations that protect the rights of persons with disabilities. They also must ensure that their staff members do the same.

2. Distribute Handout 2–The Law and ask participants to review it, focusing on the definitions in Title III.

3. Distribute Handout 3–Dayne's Story. Ask participants to read the story, then answer the Discussion Questions.

4. Lead a discussion with participants, using their answers on Handout 3–Dayne's Story as a starting place. Use Handout 4–Putting the Law into Practice to help cover other key points. At the end of the discussion, distribute Handout 4 to participants.

5. Remind participants about the program's policy on confidentiality. Then ask a volunteer to share the description she prepared of a child with a disability in the program.

6. Lead a discussion with participants about this child's needs. Ask participants to discuss how the family has been or should be involved.

7. Have participants generate a list of implications of possible accommodations for safety, facilities, meals, transportation, restrooms, classroom, playground, parent involvement, and staff training. Reinforce the concepts in Handout 4–Putting the Law into Practice.

8. Ask participants to prioritize the list and develop an action plan. This should include the first 3 steps that need to be taken, the person responsible, and a target date for completion.

Wrap-Up and Next Steps

The intent of ADA is clear. People with disabilities have a right to full participation in schools, the community, and the workplace. Implementation of ADA is not only good practice. It's the law. Interpretation of terms and solutions to barrier removal are left open. Individual solutions must be tailored to meet individual needs. A positive attitude and willingness to do your best to make your program work for everyone is the key to success. Distribute and review Next Steps: Ideas to Extend Practice. Help participants choose the Next Step(s) they would like to pursue.

Next Steps: Ideas to Extend Practice

You can continue to build on the knowledge gained during these sessions, both as a team and with the entire staff. Ways to continue your work in this area include:

- Developing and conducting program-wide training for staff and parents to raise awareness of ADA and the program's commitment to protect the rights of children and adults with disabilities. As part of the training, feature a panel with adults with disabilities. Ask panelists to focus on their personal experiences in overcoming barriers in the community and the workplace, and what ADA means to them. Your local speakers' bureau or your regional Training and Technical Assistance (T/TA) provider with an expertise in disabilities services will be able to help you identify speakers for this session.

- Enhancing your ability to comply with Title I of ADA. As a management team, watch the video *Making the ADA Work for You* (see the Resources section). Use the video as a springboard for developing an action plan, reviewing and updating all job descriptions so that "essential" and "marginal" functions of each position are clarified.

- Forming a task force to continue the work begun in Activity 2-3: Let's Take a Look. Be sure to include an individual with a disability on the task force. Charge the task force with completing the facilities audit and further developing the plan for compliance. The plan should identify short- and long-term goals, and an implementation timeline for making their facility barrier free. The task force may consult the Disability and Businesses Technical Assistance Center (see the Resources section) for information and guidance. They may also check with their regional T/TA provider with expertise in disabilities services to find other Head Start programs that have creatively removed existing barriers without undue financial hardship.

- Working with staff members and parents so they more fully understand the intent and legal requirements of ADA. Use Handout 3–Dayne's Story (pp. 39-40) and questions 1, 2, 4, and 5 as part of a program-wide meeting or training.

Handout 2: The Law*

The Civil Rights Act of 1964 made discrimination on the basis of race, sex, religion, and national origin illegal. Since that time, people with disabilities and their supporters have worked to guarantee the civil rights of persons with disabilities as well. In addition to learning about the federal legislation, you will need to become familiar with the state and local statutes that protect the rights of people with disabilities in your area.

Section 504 of the Rehabilitation Act of 1973

Section 504 of the Rehabilitation Act of 1973 prohibits discrimination on the basis of physical or mental disabilities, and applies to every federally funded program or activity in the country. It was a first step in guaranteeing the rights of persons with disabilities.

> *No otherwise qualified individual with handicaps in the United States . . . shall, solely by reason of her or his handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.*

Section 504 "thus represents the first civil rights law protecting the rights of handicapped persons and reflects a national commitment to end discrimination on the basis of handicap" (Preamble, 42FR 22676, col.2 May 4, 1977). This legislation applies to every program or activity in the country that receives federal funding, including Head Start programs.

The Americans with Disabilities Act

In 1990 Congress reaffirmed and extended the Civil Rights Act and Section 504 with the passage of the Americans with Disabilities Act (ADA; P. L. 101-336). ADA is comprehensive civil rights legislation that creates sweeping protection of the rights of people with disabilities. No longer is discrimination prohibited solely in federally funded programs, but also in privately owned businesses and facilities open to the public. ADA protects the basic civil rights of all individuals with disabilities, protection similar to that provided to individuals with respect to race, sex, national origin, age, and religion. It further states that all government facilities, services, and communications must be accessible, consistent with the requirements of Section 504.

Specifically, ADA gives civil rights protection to individuals with disabilities under these titles:

Title I—Employment. Privately operated businesses or programs that employ 15 or more people may not discriminate against any qualified person with a disability who can perform the "essential functions" of the job with or without accommodations. The employer must provide "reasonable accommodations" unless "undue hardship" would result.

The terms "essential functions," "reasonable accommodation," and "undue hardship" are used in ADA to describe reasonable limits on the steps necessary to comply with the law. These terms, however, are not precisely defined. The basic principles of each are as follows:

*Adapted with permission from The Arc of the United States. 1993. *All Kids Count: Child Care and the Americans with Disabilities Act.* Arlington, TX: The Arc of the United States.

Handout 2: The Law (page 2)

- "Essential functions" refer to the fundamental job duties of the position, in contrast with the position's marginal functions. A person with a disability is qualified for the job if he or she can perform the essential functions of the job with or without accommodation.

- "Reasonable accommodation" is any change or adjustment in the application process, the job, or the work environment that allows the person with the disability to perform the essential functions of the position.

- "Undue hardship" refers to an accommodation that would be significantly difficult or expensive to implement.

Title II—Public services. Businesses or programs that receive state or local funds must not discriminate against qualified individuals with disabilities in services, programs, or activities.

Title III—Public accommodations. Businesses and programs must provide persons with disabilities equal access to goods and services. Programs such as Head Start are required to ensure equal access in the following ways:

- Making sure eligibility criteria are not discriminatory.

- Removing physical barriers.

- Making reasonable modifications in policies, practices, or procedures.

- Providing auxiliary aids and services to ensure effective communication.

Public accommodations offering transportation services must provide equivalent transportation services to individuals with disabilities.

However, these changes are not required in the following cases:

- Barrier removal is not "readily achievable."

- Modification of policies, practices, or procedures fundamentally alters the essential nature of the goods and services the program provides.

- Provision of auxiliary aids and services to ensure effective communication fundamentally alters the nature of the service or is an "undue burden."

Handout 2: The Law (page 3)

Title III also ensures that parents, guardians, and caretakers who have disabilities also have access to the program and the facility.

ADA uses the terms "readily achievable" and "undue burden" to describe reasonable limits on the steps necessary to comply with the law. These terms, however, are also not precisely defined. The basic principles of each are as follows:

- "Readily achievable" with regard to barrier removal means able to be carried out without much difficulty or expense. Cost of removal and financial resources of the program are two of the factors to be considered in this determination.

- "Undue burden" with regard to the provision of auxiliary aids and services means significantly difficult or expensive. The same factors as those listed above are aspects of this determination; however, "undue burden" is a higher standard than "readily achievable."

Title IV—Telecommunications. Telephone and television companies must provide services to people with hearing and speech impairments.

Who is a Person with a Disability?

According to ADA, a person with a disability is defined as follows:

- An individual with a physical or mental impairment that significantly limits at least one major life activity (for example, alcoholism, Down Syndrome, mental retardation, depression, severe asthma).

- An individual with a history or misclassification of a disability (for example, a person who was treated for cancer that is now in remission, or a child who was misdiagnosed as having a disability, or a person who once suffered from a psychiatric disorder).

- An individual who is perceived by others as having a disability (for example, a person with severe burn scars, or a child who is rumored to have HIV).

Handout 3: Dayne's Story

Marika is a bright, recently hired Head Start teacher in an urban, center-based Head Start program that serves 500 children and families. On one busy Monday afternoon, Marika happened to pick up the secretary's phone.

The woman on the other end of the line said, "Good morning. I'm a Telephone Relay Service operator relaying a call from Mrs. Stanley, who is deaf. I will be the interpreter between you and Mrs. Stanley." Marika, hesitating a bit, replied, "Okay."

The operator waited a moment for the teletypewriter (TTY) message from Mrs. Stanley, then continued. "I would like to enroll my foster child in the Head Start program. I live in the D Street projects, and I have several friends who have children in your program. I want you to know that Dayne is a four-year-old, active boy and he, too, is deaf."

"Uh, okay," Marika replied, wondering what to say next. Then she added, "Actually, I don't know if our program is equipped right now for Dayne, or what we would have to do to get ready for him. How can you be reached later in the day? I will have someone call later to help you."

Discussion Questions:

1. What do you think of Marika's reply? If you were Marika, would you have replied differently? If yes, why? What exactly would you have said? Write your response below.

2. If you were Marika, what would be your next steps? How would you follow through?

Handout 3: Dayne's Story (page 2)

3. As a manager, what steps would you take to ensure that the program responds fully to Mrs. Stanley and Dayne?

4. Think about possible accommodations that you can make so that the program and its services are fully accessible to Mrs. Stanley and Dayne. Consider facilities, safety, meals, transportation, rest rooms, classroom, and parent involvement practices. Then jot down ideas for accommodations that might be necessary in these areas.

5. What information do you want from Mrs. Stanley before you act? What resources might you tap to help you with accommodations?

6. As a manager, what else do you need to do to ensure that the program accepts, respects, and does not discriminate (knowingly or unknowingly) against individuals with disabilities?

Handout 4: Putting the Law into Practice

Lead a brief discussion on each of the questions on Handout 3–Dayne's Story. Emphasize the following points during the discussion.

- *Create a climate of respect and acceptance.* Often the biggest barriers for persons with disabilities are the attitudes and misperceptions of others. Managers must therefore establish an environment where children and adults with disabilities are welcomed and accepted. Focusing on the carrot ("This is the kind of program we want to be") rather than the stick ("It's the law") is one way to create and sustain this climate.

- *Use the family as the first resource for identifying needs and possible accommodations.* Meeting with the Stanleys early in the process is essential. Mrs. Stanley is the expert about what she and Dayne want and need; she probably has many ideas for inexpensive accommodations as well.

- *Provide staff with basic information on ADA.* Conducting training sessions for all staff on ADA will ensure that all employees understand the law and its implications for the program. With information and support, staff will be better equipped to protect the rights of persons with disabilities; such training will help protect the program as well.

- *Make reasonable accommodations on a case-by-case basis.* Even people with the same disability will want or need different accommodations. For example, not all people with hearing impairments need or want an interpreter who signs. Some prefer to express themselves orally and to read lips. Staff can only find out by asking.

- *Prioritize and implement necessary accommodations.* After meeting with the family, develop and implement a plan for accommodations. Some accommodations will have to be made immediately; others may evolve over time. For example, installing a system for emergency signals that do not rely on sound, such as lights at strategic locations (bathrooms, corridors, classroom) that flash when the fire alarm is tripped, should be a top priority. Working with Mrs. Stanley to find a phone where she can comfortably use her teletypewriter (TTY) may come later.

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Handout 5: Title I*

Title I of the Americans with Disabilities Act (ADA) makes it unlawful to discriminate in employment against a qualified individual who has a disability. All employers with 15 or more employees are legally obligated to comply as of July 26, 1994.

Basically, Title I mandates that private employers can no longer discriminate against any "qualified" individual unless undue hardship would result. "Qualified" is defined as any person who can perform the essential functions of the job with or without accommodation.

ADA makes it unlawful to discriminate in all employee practices, such as:

recruitment	salary	promotion	firing
training	leave	hiring	other employment-related
benefits	layoffs	job assignments	activities

"Reasonable accommodations" and "undue hardship" are not clearly defined, and you and the employee, with the assistance of a legal expert when necessary, will have to work in good faith to make all reasonable accommodations.

Although some employers are wary or even frightened of this title and its implications (cost, liability), many report that accommodations can be easily and inexpensively made, and that the workforce has benefited as a result of including adults with disabilities in their workplace.

*Adapted with permission from *Child Care Information Exchange*. July-August 1993. Implications of the Americans with Disabilities Act, by L. Meservey. Issue Number 92: 81-83. P.O. Box 2890, Redmond, WA 98073, 800-221-2864.

Handout 6: Opinion Survey*

Rate the following statements using the scale below. After completing the survey individually, you will be asked to discuss your thoughts together as a team.

Strongly agree **Strongly disagree**

1 2 3 4 5 6 7 8 9 10

1. We can decide *not* to hire a qualified teacher if she has a facial disfigurement that might frighten three and four year olds.

2. We can decide *not* to hire a qualified family services worker if she uses a wheelchair and is therefore unable to make home visits.

3. We can decide *not* to hire a qualified home visitor if she has a chronic back problem.

4. We can decide *not* to hire a qualified cook if she is HIV positive.

5. Once we hire a person with a disability, we cannot give her negative feedback or we may be dealing with a lawsuit.

6. We can decide *not* to hire a qualified supervisor with severe asthma if all of our buildings are old and the air quality is not healthy for a person with asthma.

7. We are obliged to provide accommodations, even costly ones, if needed by a person with a disability. For example, if an administrative assistant develops multiple sclerosis and is no longer able to type consistently, we are obliged to buy a voice-activated word processing system so she can perform her tasks.

8. We can decide *not* to hire a qualified janitor if we find out he has a past history of serious mental illness.

*Adapted with permission from Barr Films. *Making the ADA Work for You: Discussion Leader's Guide*. 1992. Irwindale, CA.

Handout 7: Six Key Aspects of Title I of ADA*

Essential Functions

What keeps people with disabilities out of the workforce are prospective employers' misperceptions about what people with disabilities can and cannot do. ADA seeks to remedy this by means of the following requirements:

- The employer must determine the "essential functions" of each job.
- Hiring decisions must be made on the basis of a person's ability to perform those essential functions, with or without accommodations.

Marginal Functions

ADA makes a distinction between essential functions and marginal ones: essential functions are fundamental to the job; marginal functions are those that are not absolutely crucial. ADA mandates that marginal functions be dropped if necessary, or reassigned to other employees.

Customer and Employee Reactions

ADA states that reactions of others are not a valid basis to refuse to hire someone. Hiring decisions cannot be guided by the presumed prejudices of others.

Effective Supervision

ADA makes it clear that a manager's responsibility doesn't end with hiring a person with a disability. The responsibility "continues through every part of employment, including effective supervision." In fact, effective supervision is every employee's right.

Reasonable Accommodation

ADA requires employers to provide individuals with disabilities a "reasonable accommodation." A reasonable accommodation is any change that allows the person with a disability to do their work successfully. When determining the best and most reasonable accommodation, the most important resource is usually the person with the disability.

Undue Hardship

ADA does not obligate programs to provide accommodations if they would impose an undue hardship. "Undue hardship" is defined as an "action requiring significant difficulty or expense" and is determined on a case-by-case basis.

*This handout has been adapted with permission from Barr Films. *Making the ADA Work for You: Discussion Leader's Guide*. 1992. Irwindale, CA.

Collaborating with LEAs

Outcomes

After completing this module, participants will be able to:

- Assess their program's working relationship with local education agencies (LEAs).
- Identify objectives and strategies for strengthening the collaboration with LEAs to improve services for children and families.

Key Concepts

- Successful collaborations are built on knowledge and mutual respect. Both Head Start and LEA managers/administrators need a thorough knowledge of the legislation that impacts their program policies and services to children with disabilities and their families. Both partners in this collaborative effort have unique capabilities for contributing to these services.
- Providing services to children with disabilities enrolled in Head Start is a shared responsibility. Children with disabilities and their families may require a wide range of supports and services that draw on the resources of all Head Start managers, as well as community organizations.

Background Information

Each state is responsible for assuring that young children with disabilities receive a free and appropriate public education (FAPE) as outlined in the Individuals with Disabilities Education Act (IDEA). Often, services are provided through LEAs and early intervention programs. (See the Resources section for materials that can provide more information about laws affecting services to children with disabilities and their families.)

The Head Start Program Performance Standards describe Head Start's obligations to follow federal laws and to be active partners with LEAs in implementing IDEA. While Head Start programs' and LEAs' responsibilities differ, both agencies must work together to best meet the needs of children with disabilities enrolled in Head Start. To accomplish this, they must develop and sustain a true partnership that reflects their unique contributions. There is no simple recipe to follow. Instead, agencies must understand their respective mandates, be committed to providing collaborative services, and be willing to investigate alternative approaches that are responsive to children's needs. Like other relationships, interagency collaboration depends on both parties' commitment to carry out the spirit and letter of their mandates.

Module 3

One way to formalize working relationships is through written inter-agency agreements. These agreements, which are mandated by the Head Start Program Performance Standards, can help different agencies establish routine procedures and develop a common set of expectations about roles to collaboratively meet the needs of young children with disabilities and their families.

For an overview of activities in this module, see At A Glance on pp. 5-8.

Activity 3-1: Myths and Reality

Purpose: This workshop activity provides participants with an opportunity to explore the common myths that LEAs and Head Start programs have about each other.

Preparation

Arrange for: Easel, chart paper, markers, and tape

Duplicate: Handout 8–Head Start/LEA Questionnaire (p. 66): one for each participant
Handout 9–Just the Facts (p. 67): one for each participant

Leading the Activity

1. Introduce the activity by explaining that participants will begin by responding to a questionnaire. The statements are designed to help the management team identify their assumptions about the roles and responsibilities of Head Start and LEAs in providing services to children with disabilities and their families.

2. Distribute Handout 8–Head Start/LEA Questionnaire. Tell participants that their opinions and ideas will be used as a springboard for discussion of complex, interagency issues. Assure them that they will not hand in their responses.

> **Tip for the Trainer:**
>
> Participants may express strong feelings during this activity based on their past experiences in working with LEAs. While it is important to acknowledge their feelings, the focus of the activity should remain on debunking the myths.

3. Allow participants 10 minutes to complete their responses. When everyone has finished, ask for volunteers to begin the discussion by sharing their opinions. Use the Discussion Guide below as a guide for discussing the items.

4. Distribute Handout 9–Just the Facts and review it with participants. This handout summarizes the main points of the discussion guide.

Use the guide below to discuss the responses to the questionnaire.

Discussion Guide

Q: When a child with a disability enrolls in Head Start, is the Head Start program completely responsible for assuring that he or she receives the necessary services?

The answer to this question is complex. Many misunderstandings on this issue arise because each party assumes the responsibility belongs to the other. When a child with a disability enrolls in Head Start, her Individualized Education Program (IEP) will clearly state what special services she requires. If an IEP has not been developed beforehand, Head Start staff, parents, specialists, and LEA staff will work together to create one. Often, the child may receive necessary special services right at the Head Start program. Head Start program staff need to work closely with LEA staff to meet the needs of children with disabilities enrolled in Head Start. Both the Head Start program and the LEA are each 100 percent responsible for working together to assure children with disabilities receive all needed services. This requires a collaborative effort and attitude on everyone's part. One way to launch the necessary partnerships is to work together on establishing a written interagency agreement.

Q: Regular preschool programs such as Head Start can provide effective services to children with mild or moderate disabilities. Can Head Start serve children with more significant disabilities?

There is no set of exact specifications to describe settings that are most appropriate for children with disabilities. Every child with disabilities has a unique set of abilities and needs, as do children who are typically developing. The severity of a child's disabling condition is not the sole factor used to determine what is the best educational setting. Identifying the child's strengths and needs in an IEP is the best way to decide on the most appropriate Least Restrictive Environment (LRE). That is the purpose of the IEP meeting: to develop an appropriate plan with the required parental input, a plan that considers available options, such as Head Start, an LEA preschool program, or another early childhood program. The IEP process also protects the rights of the child and her family to receive the services detailed in the IEP.

Discussion Guide, continued

Q: Can children who are delayed in their development or immature for their age benefit from an additional year in Head Start? Will waiting an additional year ensure that they will be successful in kindergarten?

Having children spend an additional year in Head Start is usually not the answer, although there may be cases where a child's IEP provides strong rationale for keeping the child in Head Start for an additional year. In either case Head Start staff should collaborate with public schools to make sure there are smooth transitions from Head Start to public schools for children with a wide range of abilities. This collaboration might involve inviting kindergarten teachers to see what happens in Head Start classrooms or joint training sessions for Head Start and public school staff. Schools across the country are becoming more aware of how to adapt their curriculum to accommodate children who need more support.

Q: If parents choose to enroll their child with a disability in a preschool program other than the LEA's, does the child retain her right to FAPE provided by the LEA?

A child's right to FAPE is never forfeited. Sometimes the most appropriate placement for a child with a disability is a private program for which a tuition must be paid. This is a decision that is made by parents as integral members of the team. Regardless of where a child with a disability is placed, the LEA retains responsibility for ensuring compliance with the IEP. Another agency may actually implement or address the goals of a child's IEP, but the family's right to FAPE is never forfeited.

Q: Are teacher-directed methods more effective than child-initiated methods in enabling children with disabilities to gain specific skills?

The needs of the child, as outlined in his IEP, help determine what teaching methods will enable him to build on existing skills and learn new ones. The overriding issue is not whether the activities are teacher-directed or child-initiated, but the specifics of the IEP and the best approach for the individual child and his family.

Discussion Guide, continued

Q: Is the LEA completely responsible for delivering all special services for children with disabilities in the community?

The language of both the Head Start Act and IDEA indicate that both parties are responsible for assuring that necessary services for children with disabilities are provided. The LEA is also likely to have a plan for implementing IDEA that will influence its relationships to Head Start programs in its service area. Consequently, it is extremely important for members of Head Start management teams to understand which areas of their programming such a plan might affect. Head Start and LEAs are both responsible for establishing collaborative agreements that support the special needs of young children with disabilities and their families. Head Start managers should seek the support of their regional Training and Technical Assistance (T/TA) provider in this effort.

Q: Do Head Start and other community-based programs need consultant specialists to make informed referrals to the LEA?

Not necessarily. Head Start teachers are professionals with experience in the assessment of young children with a wide range of needs and abilities. Fundamental skills that teachers need to be sound referral sources are the ability to observe children, interpret their observations, write them down in a nonjudgmental way, and solicit the parent's observations for confirmation. It is important to remember that a referral cannot be made without parent approval.

Q: If Head Start conducts its own evaluation of children with disabilities, does it have to share this information with the LEA?

Only with parent permission can evaluation results be shared. In many cases the willingness to share this information facilitates collaborative relationships with LEAs and avoids duplication of resources and additional burdens for the child and parents.

Discussion Guide, continued

Q: Should Head Start programs contribute money to related services for children with disabilities?

One of the difficult parts of negotiations between Head Start programs and LEAs is getting past the misconception that each is somehow "holding out" on the other with respect to funds available for needed services. Both parties have guidelines to follow regarding allocating funds for serving children with disabilities and their families, and should enter into partnerships with other agencies prepared to be fully responsible within the limits of their program's regulations. Whenever possible, Head Start should look for ways to contribute to related services, for example, providing transportation, paying for mental health professionals, etc. Such contributions will only strengthen a Head Start program's relationship with LEAs, which will result in better services for children.

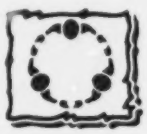
Q: Will the transition from Head Start to public school be difficult for families of children with disabilities because LEAs do not offer parent support services?

It is not useful to assume that LEAs do not offer support for parents, particularly parents of children with disabilities. In fact, Head Start can ease the transition for families by helping them develop positive relationships with public school staff well before their children enter school. Head Start, for instance, can jointly sponsor awareness sessions with LEAs to help Head Start parents understand the types of services that will be available in the public schools, the role parents play, and strategies for advocating for their children. Head Start staff can also help link families with parent groups and other resources that can ease the stress involved in transition. For instance, some LEAs have parent advisory councils that bring parents of children with disabilities together for training and support. These councils may also advise directors of special education on needed services and district-wide plans.

Summing Up

Conclude this activity by summarizing information and highlighting key points. Emphasize that collaboration is a process that takes time, time to dispel myths while creating a common vision for disabilities services. Both processes are instrumental in establishing trust and building successful partnerships with LEAs.

Activity 3-2: Procedural Safeguards



Purpose: This workshop activity illustrates the procedural safeguards that protect the rights of parents of children with disabilities. These safeguards define the role Head Start managers play in facilitating the relationship between parents of children with disabilities and LEAs. All managers must understand that Head Start staff have an important responsibility to empower and advocate for the parents in their program.

Preparation

Duplicate: Handout 10–Carmen and Jonathan (pp. 68-71): one for each participant
Handout 11–Defining Family-Centered Support (p. 72): one for each participant

Leading the Activity

1. Introduce the activity by explaining its purpose and the agenda for this session.
2. Distribute Handout 10–Carmen and Jonathan.
3. Allow 15 minutes for participants to read the handout.
4. Ask participants to answer the question "If you were Rachelle, what would you say to Marie?" Ask them to write their responses in the space provided.
5. Ask for volunteers to share their responses with the rest of the group.
6. Lead a discussion of key issues in the story using the discussion guide below.

Discussion Guide

When you ask for volunteers to share their responses, encourage the dialogue by using the questions below:

- What factors does Rachelle need to consider when she discusses Jon's therapy with Carmen?
- How far should Rachelle go in trying to convince Carmen to consider having Jon receive therapy in the classroom setting?
- Was Rachelle wrong to let Carmen go down this path and say the things she said at the IEP meeting?

In your discussion, be sure to emphasize these points:

IDEA (P. L. 101-476) clearly defines and protects the rights of parents of children with disabilities to participate in the decisions made about their

children's education. These rights include informed consent. This means that parents must clearly understand and agree to the evaluation and program decisions made for their children.

Free and appropriate public education is the right of every child, including children with disabilities. The most appropriate setting is decided based on the unique strengths and needs of each child.

Head Start staff (and the staff of cooperating LEAs) have the responsibility for helping parents understand all of their rights. It is not safe to assume that they will know them. It is a violation of a parent's rights to allow them to enter into the decision-making process without all the information they need in order to give informed consent.

Parents are the ultimate decision-makers in the IEP process. An IEP cannot be implemented without a parent's permission.

A family-centered approach to services supports a parent's right to informed consent. It helps parents consider all their options and empowers them to make decisions in the best interests of their children. This empowerment and consideration applies even when parents do not agree with a program's goals or philosophy about inclusive practices (distribute Handout 11–Defining Family-Centered Support here if you think it will further the discussion).

All Head Start staff need to understand their program's commitment to inclusive practices. This is critical for staff who work closely with parents of children with disabilities.

In this case, even though Rachelle was committed to having specialists in the classroom, she also knew that the decision of what to do for Jonathan was ultimately Carmen's, and that she needed to respect Carmen's thoughts and wishes. Furthermore, it would be harmful to her relationship with the family to undermine Carmen by disagreeing with her in front of Marie. Rachelle's response to Marie should clarify her knowledge of Carmen's rights and explain that her role in that meeting was to support Carmen.

Summing Up

Sum up the discussion by highlighting the importance of procedural safeguards and the role that Head Start managers play in supporting parents. These are particularly significant if managers are striving to offer family-centered support to children with disabilities and their parents. Managers may also have the crucial responsibility of helping parents understand their rights and empowering them to exercise those rights (even if they do not coincide with the program's goals). Remind participants that in previous activities, the team discussed its goals for quality disabilities services. It is imperative that all staff understand these goals and that their actions reflect them.

Activity 3-3: The Role of Head Start Staff in IEP Meetings

Purpose: This coaching session is designed to prepare participants for their supervision of staff who work with children with disabilities and their families. In order to do this effectively, Head Start managers need a thorough understanding of the procedural safeguards that are outlined in IDEA. Supervisors must guide staff in ways that demonstrate an understanding of the laws that protect children with disabilities and their families.

Preparation

To prepare for this session:

- Review all the directions and handouts.
- Duplicate Handout 9–Just the Facts (p. 67), and Handout 10–Carmen and Jonathan (pp. 68-71): one for each participant

Conducting the Session

1. Welcome the participants and discuss the purpose of today's session. Explain that during this session they will learn about the procedural safeguards of IDEA that protect certain rights of children with disabilities and their parents.
2. Give each participant a copy of Handout 10–Carmen and Jonathan. Explain that it tells the story of a Head Start staff person helping a family with the Individualized Education Program (IEP) process. Explain to participants what an IEP is if they do not know already.
3. Allow 15 to 20 minutes for participants to read the handout and respond to the question at the end of the story: "If you were Rachelle, what would you say to Marie?"
4. Invite participants to share how they responded to the question. Use the questions and the discussion guide below to help lead the discussion.
5. Distribute Handout 9–Just the Facts, and discuss the important points it raises.

Ask participants to consider the following questions:

- What factors does Rachelle need to consider when she discusses Jon's therapy with Carmen?
- How far should Rachelle go in trying to convince Carmen to consider having Jon receive therapy in the classroom setting?
- Was Rachelle wrong to let Carmen go down this path and say the things she said at the IEP meeting?
- Think about the overall agreement between the LEA and the Carver Head Start Center. How will the decisions made at this meeting impact the way other children receive services?
- Is there an alternative, besides having Jonathan go to the clinic for therapy, that could potentially satisfy everyone? What would work? When and how should it be presented?
- Imagine you are Rachelle's supervisor. If she came to you for advice on how to discuss the options for Jonathan and the program's philosophy on inclusion, what would you say?
- As a supervisor, if Rachelle came to you before her meeting with the LEA, what advice would you give her on how to proceed with the meeting based on Carmen's wishes?

Discussion Guide

IDEA (P. L. 101-476) clearly defines and protects the rights of parents of children with disabilities to participate in the decisions made about their children's education. These rights include informed consent. This means that parents must clearly understand and agree to the evaluation of their children and program decisions made for them.

Free and appropriate public education is the right of every child, including children with disabilities. Decisions about the most appropriate setting are based on the unique strengths and needs of each child.

Head Start staff (and the staff of cooperating LEAs) have the responsibility to help parents understand all of their rights. It is not safe to assume that they will know them. It is a violation of a parent's rights to allow them to enter into the decision-making process without all the information they need in order to give informed consent.

Parents are the ultimate decision-makers in the Individualized Education Program (IEP) process. An IEP cannot be implemented without a parent's permission.

A family-centered approach to services supports a parent's right to informed consent. It helps parents consider all their options and empowers them to make decisions in the best interests of their children. This empowerment and consideration applies even when parents do not agree with a program's goals or philosophy about inclusive practices (distribute Handout 11–Defining Family-Centered Support here if you think it will further the discussion).

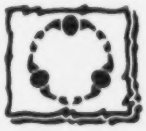
All Head Start staff need to understand their program's commitment to inclusive practices. This is critical for staff who work closely with parents of children with disabilities.

In this case, even though Rachelle was committed to having specialists in the classroom, she also knew that the decision of what to do for Jonathan was ultimately Carmen's. It would be harmful to her relationship with the family to undermine Carmen by disagreeing with her in front of Marie. Rachelle's response to Marie should clarify her knowledge of Carmen's rights and explain that her role in that meeting was to support Carmen.

Wrap-Up and Next Steps

Sum up the discussion by highlighting the importance of procedural safeguards and the role that Head Start managers play in supporting parents and supervising staff. Head Start staff have an important role in advocating for and supporting the rights of parents of children with disabilities, and they need the guidance and support of managers to do this job effectively. It is also important for managers to know when to intervene and collaborate with staff in their communication with LEAs to address the often complex needs of children with disabilities and their families. Distribute and review Next Steps: Ideas to Extend Practice. Help participants choose the Next Step(s) they would like to pursue.

Activity 3-4: Images of Collaboration



Purpose: The previous activity focused on the procedural safeguards that define how Head Start managers advocate for and collaborate with parents. In this workshop activity, participants focus on a different kind of collaboration: that between Head Start programs and LEAs. The videotape *Getting Together* serves as the centerpiece, vividly illustrating the issues that Head Start programs and LEAs confront as they provide services for children with disabilities. This video will help participants examine strategies for promoting collaboration in their own community.

Preparation

Arrange for: VCR, monitor, and videotape *Getting Together*

Preview: *Getting Together*, which is 20 minutes long, at least twice. If you need to order a copy of this video, refer to the Resources section.

Duplicate: Handout 12–Viewer's Guide (p. 73): one for each participant

Leading the Activity

1. Introduce the activity and review the agenda with participants. Tell them they are about to watch a videotape, *Getting Together*, that was made in Kansas about a Head Start program and an LEA. Explain that this videotape is a case study that will provoke their thinking about the issues that can arise when Head Start programs and LEAs develop collaborative agreements.

2. Distribute and briefly review Handout 12–Viewer's Guide. Explain that these questions will help focus their viewing and the subsequent discussion.

3. Show the videotape.

4. Begin the discussion by asking participants to share their general reactions to the videotape. Use the questions on Handout 12–Viewer's Guide to prompt the group. Ask participants to share their observations and ideas, using examples from the videotape. Use the Discussion Guide below to raise key issues and help participants realize the importance of collaboration and the need for all members of the management team to support the effort.

Discussion Guide

Use the following key points to reinforce the team's observations.

- Collaboration is, first and foremost, based on a relationship of mutual respect and trust. Sometimes collaborative efforts start and evolve slowly. In one program, a relationship with a new administrator from the LEA or early intervention program may begin with a breakfast, so that key players have a chance to meet and informally chat with one another. Another program might decide that they need a more formal discussion or training about what Head Start is and does, as well as what the LEA or early intervention program is and does. Other programs may start with agreements about joint training sessions for staff and move relatively quickly to establishing more comprehensive and formal agreements. Programs may collaborate to plan training, and provide opportunities for staff to visit one another's sites.

- Mutual understanding lays the foundation for a strong relationship. Key elements of relationships help strengthen collaboration, resulting in better services for children. To achieve this result, managers must be willing to do the following:

  - abandon the notion of protecting "turf"
  - acknowledge one another's expertise
  - evaluate the contributions that each can make
  - recognize that each brings a unique perspective that grows out of their district rules and regulations, and an understanding of their community

Summing Up

As the video illustrates, collaborative efforts between Head Start and the LEA work best when people "at the top" believe in the effort, make it a priority, and model it for staff. All managers must be aware of the goals, support them actively, and reinforce the message with staff they supervise.

Conclude the activity by reminding participants that even the most successful collaboration efforts can begin slowly and cautiously. Sustained effort over time can help agencies build the necessary mutual respect to create integrated services.

Activity 3-5: Getting Together

Purpose: The Head Start Act and IDEA indicate that Head Start programs and LEAs have a responsibility to serve young children with disabilities. While Head Start programs' and LEAs' responsibilities differ, they must work together to meet the needs of children with disabilities in Head Start. This coaching session will help participants assess their program's relationship(s) with LEAs and identify their role in supporting this effort.

Preparation

This session has three parts: 1) viewing the videotape *Getting Together*; 2) interviewing other Head Start managers who work closely with LEAs; and 3) creating a plan for further developing collaborative relationships with LEAs or staff from other community agencies. At the end of the session, participants will choose which Next Steps they will work on to extend their learning. To prepare for this session:

- Review all the directions and handouts for this session and Next Steps: Ideas to Extend Practice (pp. 64-65)
- Arrange for a VCR, monitor, and videotape *Getting Together*.
- Preview *Getting Together* (20 minutes) at least twice. If you need to order a copy of this video, refer to the Resources section.
- Invite one or two other Head Start managers to attend the second half of the session. Make sure that the managers you select have experience collaborating with LEAs. Ask these managers to collect pertinent information about one or two LEAs the program currently works with, including the key players, history of the collaboration, and status of interagency agreements. Suggest that the invited managers use Handout 13–Topics for Formal Agreements and Handout 14–Suggestions for Collaboration to identify key areas (for example, diagnosis, service delivery, transitions, joint initiatives) to cover during the discussion.
- Duplicate Handout 9–Just the Facts (p. 67), Handout 12–Viewer's Guide (p. 73), Handout 13–Topics for Formal Agreements (p. 74), Handout 14–Suggestions for Collaboration (pp. 75-80), and Next Steps: Ideas to Extend Practice (pp. 64-65): one for each participant

Conducting the Session

1. Welcome participants and briefly discuss the purpose of the session. Tell participants that they will first view a videotape illustrating the issues that Head Start programs and LEAs confront as they provide services for children with disabilities. Then they will have an opportunity to talk with other Head Start managers about the program's collaborative efforts with LEAs in their communities.

2. Distribute and briefly review Handout 12–Viewer's Guide. Explain that these questions will help focus their viewing of the videotape and the subsequent discussion.

3. View the videotape and discuss it with participants. Use Handout 12–Viewer's Guide to guide the discussion. During the discussion, emphasize the importance of collaboration and need for all members of the management team to support this effort.

> **Tip for the Coach:**
>
> You may use the Discussion Guide from Activity 3-4: Images of Collaboration (p. 58) to reinforce participants' observations about the video.

4. Explain that during the next 30 minutes, the invited managers will discuss the program's relationship with one or two LEAs. Ask participants to prepare two to three questions to ask their guests that will help them better understand their program's collaboration as well as their own (possible) roles in supporting the effort.

5. Welcome the guests. Ask them to provide an overview of the LEAs they selected: who they are, the history of their relationship with the Head Start program, and particular challenges they have faced as well as successes. Then invite them to provide examples that capture their working relationship in several of the key areas: Child Find, joint training, etc.

6. Facilitate a discussion, encouraging participants to ask their questions. Use the discussion to help participants gain a more accurate picture of the program's current relationship with LEAs and identify their own role in supporting the program's collaborative efforts.

7. Thank the guests for their time and insights, then discuss with participants what they have learned. Ask participants to identify three steps they will take to support their program's collaborative efforts with LEAs.

8. Distribute and review Handout 9–Just the Facts, Handout 13–Topics for Formal Agreements, and Handout 14–Suggestions for Collaboration. Explain that these handouts provide an overview of Head Start and LEA mandates.

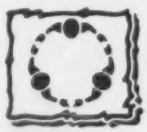
Wrap-Up and Next Steps

Briefly summarize the session with participants and highlight key points. Stress that even the most successful collaboration efforts can begin slowly and cautiously. Sustained effort over time can help agencies build the necessary mutual respect to create integrated services.

Distribute and review Next Steps: Ideas to Extend Practice. Help participants choose the Next Step(s) they would like to pursue.

Module 3

Activity 3-6: Taking Stock and Setting Priorities



Purpose: All Head Start programs are mandated to develop written interagency agreements with LEAs. To maximize the benefits for children and families, Head Start managers must also take stock of their collaborative efforts and set goals for meeting their mandates. This workshop activity will help participants assess their current relationships with LEAs and set priorities for launching and strengthening their collaborative efforts.

Preparation

Arrange for: Easel, chart paper, markers, and tape

Prepare: Ask the disabilities services manager (DSM) to come prepared to present an overview of the program's working relationship with one or two local education agencies (LEAs), including the key players, history of collaboration, and status of interagency agreements. Suggest that the DSM use Handout 13–Topics for Formal Agreements and Handout 14–Suggestions for Collaboration to identify key areas (for example, diagnosis, service delivery, transitions, joint initiatives) to cover during the presentation.

Duplicate: Handout 13–Topics for Formal Agreements (p. 74): one for each participant
Handout 14–Suggestions for Collaboration (pp. 75-80): one for each participant

Leading the Activity

1. Explain the purpose of the activity and review the agenda with participants. Emphasize that interagency collaboration depends on both parties' commitment to carry out the spirit and letter of their mandates. Point out that written interagency agreements prevent misunderstandings that can often occur when different agencies attempt to work together. Such agreements, mandated by the Head Start Program Performance Standards, are also valuable in other ways:

   - The decisions and procedures spelled out in an agreement can provide guidance even when critical personnel change.
   - An agreement clarifies agency roles, which leads to a common set of expectations.
   - It clearly defines routine procedures, allowing staff to focus their energies and resources on unusual situations that require adaptation.

3. Distribute and review Handout 13–Topics for Formal Agreements and Handout 14–Suggestions for Collaboration. Emphasize that by devel-

oping true collaborative agreements, Head Start programs and LEAs will be better equipped to offer quality services for children with disabilities and their families.

4. Tell participants that the DSM will now present an overview of their program's relationship with one or two LEAs. Such a presentation will help them better understand their program's collaboration, and help them consider their own (possible) roles in supporting the effort.

5. Give the DSM 20 minutes to describe the program's current relationship with one or two LEAs, including information about key players; the status and quality of the interagency agreement; how it was developed and how it is used; the successes they have had and the challenges they face; as well as contributions each agency has made in key areas (for example, diagnosis, service delivery, transitions, joint initiatives).

6. With participants, choose one LEA to focus on during the remainder of the session. Then help participants identify and plan steps to further the relationship with that LEA. Ask:

   - What has worked well?
   - What are the current difficulties?
   - How can we build on our current relationship?
   - What do we need to change in ourselves in order to improve our working relationship with the LEA?
   - What are reasonable next steps?

   Write the team's answers on chart paper.

7. After 20 to 30 minutes, ask participants to reach agreement about the most important next steps (generated above) that will strengthen their current relationship with the LEA, with a vision of creating a working written agreement. Write each step on chart paper. Ask managers to identify who will be responsible for taking the lead on each step, the timeline for each step, and ways other members of the management team and staff can support the lead person.

Summing Up

Tell participants that assessing their current relationships with LEAs and setting priorities and goals is an important step in improving interagency relationships, and in establishing meaningful written agreements. Point out that such a process can also help Head Start managers assess their program's relationship with early intervention programs and other community agencies, and develop next steps.

Next Steps: Ideas to Extend Practice

As the management team, there are ways you can extend what you have accomplished during these activities. Ways to continue this work include:

- The Head Start Program Performance Standards require that programs develop a disabilities services plan (DSP). The purposes of the DSP are to assure that delivering quality services to children with disabilities and their families is a program-wide effort, and to ensure that resources are used efficiently.

  As a first step, managers might review, as a team, the standards related to the DSP, asking the disabilities services manager (DSM) for clarification as needed. The DSM might then do the following:

  - give an overview of the program's current plan
  - provide a handout describing the plan's format and main sections
  - distribute the current plan and suggest sections of the plan that are in need of strengthening

  The management team can then review the plan and revisit materials they created together while engaging in the guide's activities. For example, if they conducted all of the activities, the team generated the following items which will help in enhancing their plan and the services they provide:

  - goals for disabilities services in their program, from Activity 1-2: Setting Program Goals for Disabilities Services
  - ideas for putting the law into practice in Handout 3–Dayne's Story, from Activity 2-1: What Does It Mean for Us?
  - initial plans for assessing program accessibility in Activity 2-3: Let's Take A Look
  - strategies for furthering the relationship with local education agencies (LEAs) in Activity 3-6: Taking Stock and Setting Priorities.

  The work accomplished during the previous activities, along with the materials generated and the current plan can then be used to engage all managers in a substantive discussion about goals and services, responsibility for providing children with disabilities and their families a quality program, resources available and needed improvements.

Subsequent steps might involve all managers in developing an action plan for completing or revising the DSP. Participants should also include steps they can take to help staff and parents understand the DSP and the policies that support it.

Such planning and program-wide participation can result in a thoughtful DSP that meets or exceeds the requirements of the Head Start Program Performance Standards and reflects the quality services that are being provided by the program.

- Use Activity 3-1: Myths and Reality with staff you supervise in your own program area.

- View the video *Getting Together* again. (If you need to order a copy of this video, refer to the Resources section.) This time, focus on key concepts addressed in the video such as turf issues, staffing, service delivery (meals, transportation, medication), involving parents, and constraints as they relate to your work with one of your LEAs. Because the videotape covers a number of these topics rapidly, you may want to stop it at critical points to discuss the issue being raised and its implications.

- Schedule additional management team meetings to continue the work begun in Activity 3-6: Taking Stock and Setting Priorities. As a team, continue to identify ways to strengthen relationships with each LEA in your program's service area, and ways each manager can contribute. Plan steps in the collaboration process with an eye to securing a formal written agreement.

- Plan a joint session with the management team and key personnel from an LEA. Use the video *Getting Together* as a springboard for discussing what is possible and identifying strategies to strengthen the current relationship. In your discussion, identify how you can use the interagency agreement to provide guidance, reflect your common vision, and strengthen your collaboration.

Handout 8: Head Start/LEA Questionnaire

For each of the following questions, check the box which most closely represents your own thoughts.

Statements	1 Yes	2 Sometimes	3 No	4 Don't Know
1. When a child with a disability enrolls in Head Start, is the Head Start program completely responsible for assuring that he or she receives the necessary services?	❑	❑	❑	❑
2. Regular preschool programs such as Head Start can provide effective services to children with mild or moderate disabilities. Can Head Start serve children with more significant disabilities?	❑	❑	❑	❑
3. Can children who are delayed in their development or immature for their age benefit from an additional year in Head Start? Will waiting an additional year ensure that they will be successful in kindergarten?	❑	❑	❑	❑
4. If parents choose to enroll their child with a disability in a preschool program other than the local education agency's (LEA's), does the child retain her right to a free and appropriate public education (FAPE) provided by the LEA?	❑	❑	❑	❑
5. Are teacher-initiated methods more effective than child-initiated methods in enabling children with disabilities to gain specific skills?	❑	❑	❑	❑
6. Is the LEA completely responsible for delivering all special services for children with disabilities in the community?	❑	❑	❑	❑
7. Do Head Start and other community-based programs need consultant specialists to make informed referrals to the LEA?	❑	❑	❑	❑
8. If Head Start conducts its own evaluation of children with disabilities, does it have to share this information with the LEA?	❑	❑	❑	❑
9. Should Head Start programs contribute money to related services for children with disabilities?	❑	❑	❑	❑
10. Will the transition from Head Start to public school be difficult for families of children with disabilities because LEAs do not offer parent support services?	❑	❑	❑	❑

Handout 9: Just the Facts

- When a child with a disability is enrolled in Head Start, the program and the local education agency (LEA) are each 100 percent responsible for working together to assure that she receives all needed services.

- The Individualized Education Program (IEP) is a binding agreement which stipulates the strengths and needs of a child with disabilities and his family and protects their rights. It is only through the process of developing an IEP that the most appropriate educational setting and teaching methods are decided. A developmentally appropriate Head Start classroom is often a good choice for a child with a disability.

- LEAs and Head Start should be prepared to enter partnerships for serving children with disabilities and their families, fully aware of the guidelines for allocation of funds they can contribute.

- Head Start should collaborate with public schools to make sure they are ready to receive children (for kindergarten) with a wide range of abilities and needs.

- A child's right to Free and Appropriate Public Education (FAPE) can never be forfeited.

- Only parents can decide if information from evaluations of their children should be shared outside of Head Start.

Handout 10: Carmen and Jonathan

AT THE IEP MEETING

Carmen, Elena, and Tío arrive at the Carver Center right on time for the IEP meeting. They are anxious to discuss Carmen's son Jonathan, who will soon begin attending Head Start. They are happy to see Rachelle when they arrive at the conference room. Rachelle is the Head Start staff person who has worked closely with them from the start. Marie from the public school system joins them there. Rachelle introduces everyone, "Carmen, this is Marie Richards. She's from the Coastal Public Schools. The Beacon School near your house is part of that system. Marie, I'd like you to meet Carmen Velasquez, Jonathan's mother. This is Elena Parilla and Tío Alberto Colón. They are Jon's grandmother and uncle." They shake hands and sit at the table. Rachelle leads the discussion by first talking about what Jonathan's strengths and needs are. Carmen, Elena, and Tío provide information that they think is important to know about Jonathan also. Marie listens carefully. Everyone seems to agree that Jonathan will benefit from being in a Head Start classroom. They begin to talk about how Jonathan would receive his therapy.

"All three of the therapists assigned to our school district go to the Carver Center," Marie says. "Jane, the physical therapist, is there twice a week, and we have a speech therapist and occupational therapist who go twice a week also. They all give glowing reports on the progress the children in the center have made. I'm looking forward to getting to know Jonathan too."

"Okay," Carmen responds, "but I want you to know that I don't want Jonathan to have his therapy in the classroom. I think he should go to the clinic like he always has."

Marie looks surprised. "Well, I'm sure Rachelle explained to you that we would never do anything to make the children feel like they are different, you know, being singled out. The therapists use games and other activities that children enjoy to accomplish the goals of therapy."

"Yes, Rachelle told me that. She also said Jonathan would be getting his therapy with other kids in the classroom and I don't want that. I want him to have his own time, one on one, by himself with Jane."

Marie looks curiously at Rachelle. "I see, so you've had it explained to you about the agreement between the school and Head Start to provide therapy in the classroom. The specialists are already right there at the center. You're sure you don't want that. You want Jonathan to continue going to the clinic for his individual appointments? Rachelle, I'd like to know what you think about this idea."

Rachelle thinks carefully before she replies. She remembers her first meeting with Carmen, Tío and Elena.

A FAMILY DISCUSSION

Rachelle was welcomed into Carmen's home when she visited for the first time. Tío and Elena were there too. All three carefully explained how Jon had a series of seizures just after he was born. During this time, Carmen developed a trusting relationship with the doctor who led the team that was treating Jon. Once the crisis was over, Carmen was introduced to Jane, who became Jon's physical therapist. All of the family

Handout 10: Carmen and Jonathan (page 2)

members have been involved in Jon's care. Carmen has two brothers and an older son who take Jon to and from the neighborhood clinic for all of his therapy appointments. Elena and Tío live just down the street from Carmen. They take care of Jonathan while Carmen attends classes at the community college. Jon is three years old now and has shown a lot of progress. He can walk on his own, say a few words and also uses gestures to communicate with family and friends. Carmen feels Jon is ready to spend more time around other children his age, so she decided to enroll him in Carver Head Start.

Rachelle was happy to meet them. She is always glad when families of children with disabilities express an interest in Head Start. Rachelle has been working at Carver Head Start for several years. During this time she has worked in classrooms where she was able to strengthen her inclusive practices and her belief that Head Start is one of the best placements for young children with disabilities.

As they began to talk, Rachelle explained to everyone that Carver Head Start had a nice collaborative relationship with the special needs department of the LEA in their area. Over the years the staff at the Carver Center have worked hard to help the specialists from the public schools understand the Head Start mission and philosophy. The specialists were reluctant to come to Head Start classrooms at first, but they have begun to see the benefits of providing therapy in developmentally appropriate classrooms. As she continued to explain, Rachelle could see from Carmen's expression that something was wrong.

"I'm talking too much. Perhaps you have some questions I can answer," she said.

"Well," Carmen began, "What does all this have to do with Jonathan going to the clinic to see Jane for his therapy?"

"Oh, well, Jonathan will still receive therapy from Jane. She is hired through the public schools. She provides therapy for two other little boys in our program too."

"Do they go to the Washington Street clinic too?" Tío asked.

"No," Rachelle responded, "Jane comes to the Carver Head Start center two times a week and she does activities with all the children. The therapy is done there, right in the classroom."

"Oh, does that mean Jonathan won't be going to the clinic for his therapy any more?" Elena asked.

"Well, if Jonathan received his therapy in the classroom he would not have to go to the clinic for those appointments. He would get his therapy with other children, whom he could learn from in the classroom. Jane would still be in charge of his therapy. She also works with the teachers and shows them things they can do to help all the children continue to make progress."

Carmen frowned. "I'm not sure I like that idea," she said. "Jonathan has been making so much progress with his individual therapy. If he only gets therapy in the classroom, he won't get as much attention. I like that he'll have more time to play and learn with other kids his age, but therapy time is different. That's time between just Jonathan and Jane. I don't want to change that."

Handout 10: Carmen and Jonathan (page 3)

Rachelle thought for a moment. "Well, Carmen, I understand how you feel. This is your decision, but I hope you will reconsider, or talk about it a little while longer with me. Maybe you can tell me what you think would be valuable about keeping things this way."

"Jonathan has gained a lot from his work with Jane." Carmen responded. "When he's there at the clinic with her, he really concentrates on what they're doing. And she is concentrating only on him. I think that if she's trying to work with other children, too, then he won't get as much attention. I want him to get as much as he can from those times. It seems to me he's getting more if it's just him."

"The children in Jonathan's classroom have made wonderful progress through working with the specialist right there in the classroom," Rachelle said. "They learn many of the same skills they would learn in individual therapy and get benefits from being with other children who have different strengths and needs. Being in the classrooms has helped the specialists to be creative and try things differently from what they have done in the past. It has made a real difference, not just for children with special needs but for all the children. I really think Jonathan would benefit from receiving therapy this way. Maybe you'd like to talk with some of the other parents or come observe the class and see what I mean."

Carmen, Elena, and Tío spoke to each other for a minute. "Really, I don't have to think about this much more," Carmen said. "I understand why you think that getting services in the classroom would help Jonathan. Maybe when he's a little older I'll reconsider it. Right now, I don't want to do that. Jonathan has come a long way. I know it's because he's had that special time with just him and Jane. I don't want to take any chances by changing that now. I think we should keep those things the way they are. I still want him to go to the Carver Center though. Can we do that?"

"Of course," Rachelle answered. "What would happen is that we would look at the specialists' schedule and the classroom schedule and we would arrange to have Jonathan go to the clinic or hospital, depending on who could see him when. Perhaps one of the buses would take him there and then bring him back to the Carver Center after his appointment."

"I'd really like it if he didn't have to get to know someone new. Can he continue working with Jane?" Carmen asked.

"Probably. Jane is the only physical therapist we use at the Carver Center. If Jonathan needs that kind of service, she will most likely be the person he'll go to."

"Okay, well, if we can do it that way, that's what I want."

Before the visit ended, Rachelle confirmed the date and time of the IEP meeting with Carmen, Elena, and Tío. She explained to them that Marie, from the special education department of the LEA, would also be there.

Handout 10: Carmen and Jonathan (page 4)

THE MEETING CONTINUES

"Well?" Marie asks, looking curiously at Rachelle.

Rachelle finally replies. "Well, Marie, Carmen feels very strongly that Jonathan should continue his therapy individually. He has made a lot of progress this way. I think we should use this time to talk about how we can arrange that. I've brought copies of the program calendar/schedule. Jonathan has been going to the Washington Street clinic. That's not far from the Carver Center. Maybe he can still go there for his appointments."

As the meeting continues, Carmen, Marie, and Rachelle work out a schedule that allows Jonathan to continue his individual therapy appointments. Carmen is visibly pleased. As the family leaves Marie pulls Rachelle aside.

"Listen," she says in a hushed and angry tone, "I'm really surprised at how this meeting has gone. This is a complete turnaround for you. Why are you advocating for therapy in a clinic after all we've done to get the specialists at your center?"

Put yourself in Rachelle's shoes. What do you say to Marie? Write your response in the space below.

Handout 11: Defining Family-Centered Support*

Family-centered support is . . .

"Support that is offered to the family as a whole, rather than to the child with a disability alone, and is based on the priorities and concerns that are identified by the family rather than by professionals."

*Reprinted with permission from the Early Care and Education Committee of the New Hampshire University Affiliated Program/Institute on Disability. 1993. Durham, NH: University of New Hampshire.

Handout 12: Viewer's Guide

Use the space below to take notes on pertinent issues raised by the videotape.

- What does Head Start need? What does the local education agency (LEA) need?

- What does each of them bring?

- What are the constraints that each work under?

- What are the benefits of collaboration for each partner?

Handout 13: Topics for Formal Agreements

The Head Start Program Performance Standards list the following topics to be addressed in written interagency agreements between Head Start and the LEAs:

- Child Find
- Joint training of staff and parents
- Procedures for referral for evaluations, IEP meetings, and placement decisions
- Transitions
- Resource sharing
- Counting and reporting children with disabilities
- Any other items agreed to by both parties

Handout 14: Suggestions for Collaboration*

This example is based on a review of current written and verbal agreements as well as telephone interviews with Head Start and school districts' program staff. LEAs and Head Start programs may wish to change items in the sample agreement to reflect the resources and needs of their local community.

Memorandum of Understanding between Kendall Beach School District and Alina County Head Start Program

1. Child Find and Screening

Kendall Beach School District will locate and identify all children with disabilities birth to 21 years within its jurisdiction.

Alina County Head Start Program will make available at least 10 percent of its enrollment opportunities to children with disabilities. To ensure this, Head Start programs will be proactive, by assessing resources in their community, contacting community agencies and early intervention programs, and working closely with school districts and Early Head Start programs. Once children are enrolled, all Head Start staff will assure that children's health and developmental needs are identified promptly.

Kendall Beach School District and Alina County Head Start Program will coordinate Child Find and screening efforts by:

- Training screeners.
- Informing and including parents in the screening process and follow-up.
- Sharing staff and facilities for joint screenings.
- Coordinating the instruments and procedures to be used.

2. Referral for Evaluation

Kendall Beach School District will provide evaluations of children with suspected disabilities. Evaluations will be conducted by appropriate personnel using appropriate instruments.

Alina County Head Start Program will support parents in the referral process if their children are identified as "at risk" through screenings and/or ongoing observations.

* Adapted with permission from the National Network of Resource Access Projects.

Handout 14: Suggestions for Collaboration (page 2)

Kendall Beach School District and Alina County Head Start Program will coordinate referrals for evaluation by doing the following:

- Developing referral packets and training staff in the use of them.
- Sharing responsibility in the referral procedure (such as assisting parents with paperwork and informing parents of their rights).
- Sharing report forms and diagnostic criteria.

3. Comprehensive Evaluation

Kendall Beach School District will provide comprehensive evaluations of children who may require special education.

Alina County Head Start Program will support parents in the process to obtain appropriate diagnosis for children determined to be "at risk."

Kendall Beach School District and Alina County Head Start Program may coordinate comprehensive evaluation efforts by doing the following:

- Sharing evaluation resources when possible. For example:

  –Head Start may provide the evaluations if the evaluations meet the requirements of school districts for the determination of eligibility for special education.
  –Head Start program staff may serve on the multidisciplinary evaluation team when Head Start is being considered as a placement option.

- Coordinating evaluation timelines for each agency.
- Coordinating sites and scheduling for comprehensive evaluations. For example:

  –School district personnel may provide evaluations onsite at the Head Start center.
  –Head Start may be responsible for notifying parents about evaluations.
  –Head Start may provide transportation to appointments at the school district.

- Coordinating paperwork to assure that evaluation results can be shared between agencies when appropriate, including parent permission regarding evaluation and sharing of evaluation information.

Handout 14: Suggestions for Collaboration (page 3)

4. Individualized Education Program Development

Kendall Beach School District will develop an IEP for children determined to be eligible for special education.

Alina County Head Start Program will contribute to the development of IEPs for children with diagnosed disabilities.

Kendall Beach School District and Alina County Head Start Program may coordinate the development of the IEP by doing the following:

- Making decisions about forms to be used.
- Assuring the participation of appropriate Head Start staff as part of the IEP team and designating responsibility for notification of team members for meetings.
- Facilitating the active involvement of parents by delineating responsibility for notification, explanation of the meeting's purpose, supporting their attendance and participation at meetings, etc.
- Coordinating paperwork and parental consent to assure that the IEP can be shared.
- Coordinating the IEP review to assure participation by all parties.

5. Placement

Kendall Beach School District will place preschool children in the least restrictive environment that offers children an opportunity to interact with their peers.

Alina County Head Start Program will provide services for children with disabilities in an inclusive environment.

Kendall Beach School District and Alina County Head Start Program will work cooperatively in regard to placement by considering the following options:

- Making every effort to place children in Head Start if the IEP team deems it appropriate.
- Referring children with disabilities to the Head Start program as a placement option.

Handout 14: Suggestions for Collaboration (page 4)

In this case, the following must be discussed or developed:
- –Number of available Head Start placement slots.
- –Eligibility criteria for Head Start enrollees.
- –Referral procedures to the Head Start program (contact persons, etc.).
- –Information packets and systems that provide parents with information about Head Start.

- Jointly enrolling children in the school district and the Head Start program.

6. Specific Program Service Delivery

Kendall Beach School District will provide services as designated in the child's IEP.

Alina County Head Start Program will seek out related services in the community for children with disabilities.

Kendall Beach School District and Alina County Head Start Program may coordinate services to children with disabilities by considering the following options:

- The school will provide special education resource teachers and therapists onsite at the Head Start program. The Head Start program will schedule arrangements as needed.
- The school district will reimburse the Head Start program for salaries of necessary special educators and therapists.
- The school district and the Head Start program will coordinate transportation services.

7. Procedures for Hiring and Supervising Staff Providing Special Services

Kendall Beach School District and Alina County Head Start Program will coordinate efforts by considering the following options:

- The school district hires and supervises staff.
- The Head Start program hires and supervises staff and is reimbursed by the school district.
- The school district and the Head Start program form a team to hire and supervise staff and develop procedures.

Handout 14: Suggestions for Collaboration (page 5)

8. Procedures for Reviewing/Monitoring Child's Progress

Kendall Beach School District and Alina County Head Start Program will coordinate efforts by doing the following:

- Developing procedures and forms for documenting the frequency and duration of special education services.
- Developing procedures for progress reports and periodic consultation with Head Start staff by those providing related services.
- Developing procedures for keeping parents involved and informed of their progress.
- Designating responsibility for coordination of staffing and IEP review meetings.

9. Training and Technical Assistance

Kendall Beach School District and Alina County Head Start Program will provide ongoing training for staff to increase their knowledge and ability to provide quality services to children with disabilities.

Kendall Beach School District and Alina County Head Start Program will coordinate these efforts by doing the following:

- Developing a system for staff needs assessment in the area of training.
- Coordinating training calendars.
- Training staff in the regulations and program philosophy of each agency.
- Planning joint training activities.

10. Counting and Reporting Children with Disabilities

Kendall Beach School District and Alina County Head Start Program have systems for counting and reporting children with disabilities. These efforts will be coordinated by:

- Training staff regarding specific procedures and regulations for each agency.
- Developing a system so that timelines and persons responsible for reporting are clear.

Handout 14: Suggestions for Collaboration (page 6)

11. Transition

Transition efforts from *Alina County Head Start Program to Kendall Beach School District* will be coordinated by doing the following:

- Developing a process for sharing information.
- Training Head Start staff and families about the school district program.
- Facilitating visits by Head Start children and families to the receiving school.
- Facilitating visits to Head Start by LEA staff.
- Developing special transition forms if necessary.
- Developing timelines for transition activities.

Continuing Professional Development

Professional development experiences are most effective when there is follow-up support. Follow-up builds on the team's motivation and interest and helps them transfer new skills to the workplace. It can extend the learning that takes place in workshops or coaching sessions.

Research and practice indicate that follow-up is most effective when it is:

- planned as a key component of professional development activities
- supported by colleagues and supervisors
- designed with the participant
- based on the needs, interests, and learning style of the participant

A survey is a simple method to assess the needs and interests of your management team. A sample survey appears at the end of this section.

Follow-Up Strategies

Once the team has selected its priorities, work together to design the content and approach of follow-up. Below are several follow-up strategies that can be adapted to meet the needs of individual team members or the team as a whole. These strategies can be used alone or together to help team members integrate what they have learned in their day-to-day practice.

Continued Training

Managers can extend the learning by taking courses at their local college or attending other training sessions. Many institutions of higher learning offer courses in management, special education, and child and family development. Staff from your regional Training and Technical Assistance (T/TA) network may help teams identify and negotiate with colleges and universities for credited formal training that is responsive to members' needs.

The team can also build on their skills by using the services of their regional T/TA provider with an expertise in disabilities services, by attending seminars sponsored by outside agencies, and by continuing to organize training sessions. When organizing, consider joining forces with other preschools, the local education agency (LEA), and/or other professional organizations. Cosponsored training enables personnel to form networks, set the stage for other cooperative ventures, and provide face-to-face contact between agencies. In addition, cosponsored training can act as a multiplier of resources; when responsibility is shared, so are the costs.

Personal Learning Plans

Personal Learning Plans help staff specify what they would like to learn (disability laws, advocacy skills) and how they would like to learn it (attend a course, observe others). Once they have developed a plan, team members can meet with a colleague or supervisor regularly to discuss their progress, identify needed resources, or plan next steps.

Peer Support Groups

In this strategy, a small group of staff (members of the management team or staff in the same program area) meets regularly for information and support. They share successes, discuss concerns and problems, and try to find solutions together. Peer support groups can also help staff support each other with their Back Home Plans or Personal Learning Plans. Support groups have evolving agendas, based on the needs of the members and the tasks they select to work on together. Most frequently, support groups deal with practical issues and concerns that arise in the program. Depending on the composition of the group, you may be a member or a facilitator.

Study Groups

Study groups can be used to refine and expand skills of staff (members of the management team or staff in the same program area). In study groups, staff read journal articles and books, watch videos, or listen to speakers. They then meet to discuss how the content applies to their own roles in the program and to their lives. Study group members meet regularly to learn more about research and practice, current thinking about inclusion, legislative updates, and new topics and issues. The Resources section offers suggestions for sources that can be used for study group exploration.

On-the-Job Practice, Observation, and Feedback

Ideally, observation, practice, and feedback should be ongoing and routine. Observers can use a simple form to make notes for giving feedback. Forms can focus on specific skills (working with a specialist from the LEA), or more general issues (strategies used to foster inclusion in the program). You might have new managers observe more experienced managers or have peers take turns observing each other.

This strategy is time-consuming and a bit difficult to arrange, but it is very effective and worth the effort. By observing others, managers will see different methods actually being used, gain a better understanding of different program areas, and identify how they can each contribute to improving disabilities services. Observation also promotes greater self-reflection, an essential skill for working effectively with others. By being observed in a nonthreatening way, managers can receive feedback about what works well and what alternatives to explore. It also gives them a chance to practice new skills in their actual roles.

Taking Action

With collegial support and assistance, managers can work to educate others in the program or the community about inclusion. Or they might want to investigate resources in the community and start a resource directory for staff and families. Managers, along with staff, might also want to set up a resource library with materials for parents, staff, and children (in the classroom). These activities will help staff take a more active role in advocating for children and adults with disabilities in their programs and communities.

Professional Development Survey

Now that you have successfully completed *Leading the Way*, what else would you like to learn or do? Below is a list of topics related to the learning outcomes of this guide. Place a check next to the topics that interest you. Then, in the first column, rank your top 3 choices. Follow-up activities will be designed based on your responses. Thank you!

NAME: _____

Top 3 Choices (1, 2, or 3)	Check All that Apply	I would like to learn more about . . .
____	❑	The principles and practices necessary for meaningfully including children with disabilities, and how I can advocate for them in the program and in the community.
____	❑	How inclusion benefits all of us, and how I can help others become more aware of this.
____	❑	How to plan and implement management team practices and policies that promote inclusion.
____	❑	Critical points in the disabilities services practices of the program where I must coordinate with other members of the management team.
____	❑	The laws and regulations that protect the rights of persons with disabilities, and how they apply to the program, my job, and my program area.
____	❑	How we can more fully evaluate the accessibility of program facilities and services for children and families and develop strategies for reasonable accommodation.
____	❑	How we can adapt employment practices so that they reflect the rights and protections afforded to persons with disabilities.
____	❑	The special supports needed by children with disabilities and how I can advocate for these supports.
____	❑	How to work more collaboratively with LEAs and other community agencies to improve services for children and families.
____	❑	How to develop or improve written agreements with LEAs, early intervention programs, and other agencies.
____	❑	How I can better contribute to the development and implementation of the Disabilities Services Plan.
____	❑	How I can better involve and support direct service staff and families in creating an inclusive program.
____	❑	How I can communicate more effectively, within the program and the community, about the Head Start program's collaborative approach to services for children with disabilities and their families.
____	❑	Other (please specify): _____

Check All that Apply	How do you think you learn best?
❑	Attending other training sessions or taking a course at a nearby college.
❑	Reading and writing on my own, with occasional sessions with a colleague, a supervisor, or an expert consultant.
❑	Meeting with peers for an ongoing support group in which we discuss successes and concerns, and create solutions.
❑	Meeting with peers for an ongoing study group in which we read articles, have discussions, etc.
❑	Observing experienced staff members and peers, and having them observe me as I practice new skills.
❑	Meeting with staff from my own program area to develop Back Home Plans.
❑	Receiving written notes and material from my supervisor on topics that interest me.
❑	Other (please specify): _____

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Continuing Professional Development

Resources

Refer to the following resources to learn more about the key issues presented in this guide. This chapter is organized into four main sections: Videotapes Used in this Guide, Print/Audiovisual Materials, Organizations, and Web Sites.

Videotapes Used in this Guide

Two videotapes are used in activities in this guide: *Getting together: A Head Start/school district collaboration*, and *Shining bright: Head Start inclusion*. Both were packaged on a single videotape and sent to every Head Start grantee with the first mailing of this guide in 1997. Additional copies of these videotapes may be ordered together on one tape for $82.00 (stock #2983) from Brookes Publishing Company Customer Service (800) 638-3775. Videos may also be purchased separately (see below for details).

Lindeman, D.P., and T. Adams. 1995. *Getting together: A Head Start/school district collaboration*. Parsons, Kans.: Kansas University Affiliated Program. Available from Brookes Publishing Company Customer Service (800) 638-3775. Stock #2975; $46.00.

This video illustrates the issues that Head Start programs and local education agencies confront as they provide services for children with disabilities.

Lindeman, D.P., and T. Adams. 1995. *Shining bright: Head Start inclusion*. Parsons, Kans.: Kansas University Affiliated Program. Available from Brookes Publishing Company (800) 638-3775. Stock #2959; $45.00.

This video illustrates the collaboration and planning needed to make inclusion work in Head Start.

Print/Audiovisual Materials

Adaptive Environments Center, Inc., and Barrier Free Environments, Inc. 1995. *The Americans with Disabilities Act checklist for readily achievable barrier removal 2.1*. Boston, Mass: Adaptive Environments Center, Inc. (617) 695-1225.

This checklist helps programs identify accessibility problems and solutions in existing facilities to support compliance with ADA requirements.

Child Care Law Center. 1995. *Caring for children with special needs: The Americans with Disabilities Act and child care.* San Francisco, Calif.: Child Care Law Center (415) 495-5498.

This report explains the implications of ADA for early child-care programs.

Disability Resources, Inc. 1995. *DISABILITY information at your fingertips: A guide to toll-free telephone resources.* 2d ed. Disability Resources, Inc. Four Glatter Lane, Centereach, NY 11720 (516) 585-0290.

This easy-to-use guide lists national nonprofit organizations and government agencies that provide disability-related information.

Doggett, L., and J. George. 1993. *All kids count: Child care and the Americans with Disabilities Act.* Arlington, Tex: The Arc of the United States. Publication No. 30-17. (817) 261-6003 or (817) 277-0553 (TDD).

This guide gives child-care providers information about ADA, while emphasizing the value of including all children in regular child-care settings.

Harkins, J.E., H. Levitt, and K. Peltz-Strauss. 1994. Technology and Telephone Relay Service. *Technology and Disability*, 3(3): 173-194.

This special issue on telecommunications contains a specific article on Telephone Relay Service (TRS), and explains many issues surrounding the use of the service by people who are deaf, hard of hearing, or speech impaired, as well as a number of other articles regarding the communication of people with disabilities.

IRL Program on Employment and Disability. 1996. *The implications of the ADA for personnel training.* Ithaca, N.Y.: IRL Program on Employment and Disability (607) 255-2906 or (607) 255-2891 (TTY).

This publication is one in a series of booklets focusing on ADA implementation. Other titles address such issues as attitudes towards the employment of persons with disabilities, reasonable accommodation, and total quality management and the ADA.

Meisels, S.J., and J.P. Shonkoff, eds. 1990. *Handbook of early childhood intervention.* New York: Cambridge University Press.

This collection of articles, written by leading researchers and practitioners, covers a range of topics related to young children with disabilities or developmental vulnerabilities, such as approaches to

assessment, models of service delivery, and implications for policymakers.

Meservey, L. 1993. Implications of the Americans with Disabilities Act. *Child Care Information Exchange*. July/August (93): 81–83.

This article provides information about ADA and what it means for child care. *Child Care Information Exchange* is a bimonthly publication geared to meeting the management needs of early childhood programs. A number of issues address disability-related topics.

Milt Wright and Associates, producers. 1992. *Making the ADA work for you*. Irwindale, Calif: Barr Films.

This video and accompanying discussion guide address both the attitudes and legalities necessary for managers and supervisors to effectively work with the ADA. Contact your regional Training and Technical Assistance (T/TA) provider to find out if they have a copy you can borrow.

National Information Center for Children and Youth with Disabilities (NICHCY). 1993. *Questions and answers about the Individuals with Disabilities Education Act (IDEA)*. Vol. 3, no. 3. Washington, D.C.: National Information Center for Children and Youth with Disabilities.

This free news digest answers many of the questions commonly asked by families and professionals about the mandates and requirements of the Individuals with Disabilities Education Act.

Ad Hoc 619 Work Group of the Federal Interagency Coordinating Council. 1995. *Assisting our nation's preschool children with disabilities and their families. A briefing paper on Section 619 of Part B of the Individuals with Disabilities Education Act (IDEA), 1986-1996*. Available from NEC*TAS, 500 Nations Bank Plaza, 137 East Franklin Street, Chapel Hill, NC 27514 (919) 966-7463.

This paper provides background information about the Preschool Grants Program under IDEA. The complete text is available from NEC*TAS home page (see section on Web Sites for address).

Rabb, V.Y., and K.I. Wood. 1995. *Child care and the ADA: A handbook for inclusive programs*. Baltimore: Brookes Publishing Company (800) 638-3775.

This book identifies legal issues, suggests some cost-effective solutions, and presents tools to assist programs in their efforts to comply with ADA.

Salisbury, C.L., and B.J. Smith. 1991. The least restrictive environment: Understanding the options. *Principal.* 71(1): 24–7.

This informative article provides information about the least restrictive environment and its importance for the educational and social success of children with disabilities.

Simon, S. B. *I Am Lovable and Capable (IALAC).* Chesterfield, Mass.: Values Press (413) 296-4001.

This story demonstrates the impact our negative comments have on others. IALAC materials, including a video and a filmstrip, are available from Values Press, Box 556, Chesterfield, MA 01012-0556.

U.S. Equal Employment Opportunity Commission & U.S. Department of Justice, Civil Rights Division. September 1992. *The Americans with Disabilities Act: Questions and Answers.* Available from Disability Rights Education and Defense Fund, Inc., 2212 Sixth Street, Berkeley, CA 94710 (800) 466-4232 (V/TDD).

This booklet offers straightforward answers about ADA.

Wolery, M., P. Strain, and D.B. Bailey, Jr. 1992. Reaching potentials of children with special needs. In *Reaching potentials: Appropriate curriculum and assessment for young children.* S. Bredekamp and T. Rosegrant, eds. Washington, D.C.: National Association for the Education of Young Children (800) 424-2460.

This chapter describes best practices for children with disabilities and analyzes the applicability of guidelines for developmentally appropriate practice to their early education.

Organizations

Child Care Law Center
22 Second Street, 5th floor
San Francisco, CA 94105
(415) 495-5498

This center is a nonprofit legal services organization, offering training, technical assistance, and advocacy support for improved child-care policies on local, state, and federal levels.

Disability and Business Technical Assistance Centers
(800) 949-4232 (voice/TDD)

This network of federally funded regional centers provides information, referrals, technical assistance, and materials related to all aspects of ADA.

Disability Rights Education and Defense Fund (DREDF)
2212 Sixth Street
Berkeley, CA 94710
(510) 644-2555 (voice) or (510) 644-2629 (TTY)

This national, nonprofit organization offers concise, up-to-date information on the civil rights of persons with disabilities.

Council for Exceptional Children (CEC)
Division for Early Childhood (DEC)
1920 Association Drive
Reston, VA 22091-1589
(703) 620-3660

CEC is the largest international professional organization committed to improving educational outcomes for individuals with disabilities.

Head Start Training and Technical Assistance (T/TA) Network

The national T/TA network supports local Head Start programs around a range of issues, including improving services for children with disabilities. Contact your Administration for Children and Families Regional Office for the phone number for the T/TA provider in your region.

National Early Childhood Technical Assistance System (NEC*TAS)
500 Nations Bank Plaza
137 E. Franklin Street
Chapel Hill, NC 27514
(919) 962-2001 (voice) or (919) 966-4041 (TDD)

This organization assists state agencies in developing and implementing comprehensive services for young children with disabilities and their families.

National Information Center for Children and Youth with Disabilities (NICHCY)
P.O. Box 1492
Washington, DC 20013-1492
(800) 695-0285 or (202) 884-8200

NICHCY is a clearinghouse that provides information and services on disabilities and disability-related issues. NICHCY offers technical assistance to parent and professional groups, referrals to other organizations, and materials about a range of disability-related issues which are available in English and Spanish.

National Parent Network on Disabilities (NPND)
1600 Prince Street, #115
Alexandria, VA 22314
(703) 684-6763

This national network was established to provide a presence and personal voice for parents of children, youth, and adults with disabilities. NPND shares information and resources in order to promote and support the power of parents to influence and affect policy issues concerning the needs of people with disabilities and their families. The NPND includes organizations of parents of children, youth, and adults with any type of disability.

Web Sites

http://www.edc.org/FSC/NCIP

The National Center to Improve Practice (NCIP) through Technology, Media, and Materials. This site, operated by NCIP at Education Development Center, offers a facilitated discussion forum on children with disabilities, a collection of resources about technology and special education, and links to other disability-related resources.

http://www.hood.edu/seri/serihome.htm

Special Education Resources on the Internet (SERI). SERI has links to numerous disability-related sites, including national organizations and resources for parents and educators.

http://www.cec.sped.org

The Council for Exceptional Children (CEC). This site offers information about public policy and legislation, professional development events, and materials related to children with disabilities. It also offers previews of articles in upcoming issues of CEC's journals, *Exceptional Children* and *TEACHING Exceptional Children*.

http://www.nectas.unc.edu/

The home page of National Early Childhood Technical Assistance System (NEC*TAS). This site provides an overview of organizational goals and services, as well as reports related to developing and implementing comprehensive services for young children with disabilities and their families.

http://www.public.iastate.edu/~sbilling/ada.html

Entitled the ADA and Disability Information page, this site is one outcome of the Iowa State University ADA Project. It provides an assortment of links to ADA and disability-related web sites.

Appendix A

Checklist for Existing Facilities*

The checklist on the following pages details some of the requirements found in ADA Accessibility Guidelines (ADAAG). It can be used program-wide to help your team assess accessibility in all facilities, determine what barriers may be readily removed, make improvements, and establish long-term goals for program accessibility.

*Reprinted with permission from Adaptive Environments Center, Inc. and Barrier Free Environments, Inc., 1995. *The Americans with Disabilities Act Checklist for Readily Achievable Barrier Removal, 2.1.* Boston, Mass.: Adaptive Environments Center, Inc. The checklist created by Adaptive Environments Center, Inc., was funded by a grant from the National Institute on Disability and Rehabilitation Research and reviewed for accuracy by the U.S. Department of Justice. For further guidance on the Americans with Disabilities Act (ADA), contact the Disability and Business Technical Assistance Centers, located in the 10 federal regions across the country, at (800) 949-4232 (voice/TDD).

Checklist for Existing Facilities version 2.1

The Americans with Disabilities Act Checklist for Readily Achievable Barrier Removal

August 1995

ADA TITLE III COMPLIANCE MATERIALS

To obtain additional copies of this **checklist**, *contact your Disability and Business Technical Assistance Center. To be automaticallly connected to your regional center, call* **1-800-949-4ADA**. *This* **checklist** *may be copied as many times as desired by the Disability and Business Technical Assistance Centers for distribution to small businesses but may not be reproduced in whole or in part and sold by any other entity without written permission of Adaptive Environments, the author.*

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Checklist for Existing Facilities version 2.1

Introduction

Title III of the **Americans with Disabilities Act** requires public accommodations to provide goods and services to people with disabilities on an equal basis with the rest of the general public. The goal is to afford every individual the opportunity to benefit from our country's businesses and services, and to afford our businesses and services the opportunity to benefit from the patronage of all Americans.

The regulations require that architectural and communication barriers that are structural must be removed in public areas of **existing facilities** when their removal is **readily achievable**—in other words, easily accomplished and able to be carried out without much difficulty or expense. **Public accommodations** that must meet the barrier removal requirement include a broad range of establishments (both for-profit and nonprofit)—such as hotels, restaurants, theaters, museums, retail stores, private schools, banks, doctors' offices, and other places that serve the public. People who own, lease, lease out, or operate places of public accommodation in existing buildings are responsible for complying with the barrier removal requirement.

The removal of barriers can often be achieved by making simple changes to the physical environment. However, the regulations do not define exactly how much effort and expense are required for a facility to meet its obligation. This judgment must be made on a case-by-case basis, taking into consideration such factors as the size, type, and overall financial resources of the facility, and the nature and cost of the access improvements needed. These factors are described in more detail in the ADA regulations issued by the Department of Justice.

The process of determining what changes are readily achievable is not a one-time effort; access should be re-evaluated annually. Barrier removal that might be difficult to carry out now may be readily achievable later. Tax incentives are available to help absorb costs over several years.

Purpose of This Checklist

This checklist will help you identify accessibility problems and solutions in existing facilities in order to meet your obligations under the ADA.

The goal of the survey process is to plan how to make an existing facility more usable for people with disabilities. The Department of Justice (DOJ) recommends the development of an Implementation Plan, specifying what improvements you will make to remove barriers and when each solution will be carried out: "...Such a plan...could serve as evidence of a good faith effort to comply...."

Technical Requirements

This checklist details some of the requirements found in the ADA Standards for Accessible Design (Standards). The ADA Accessibility Guidelines (ADAAG), when adopted by DOJ, became the Standards. The Standards are part of the Department of Justice Title III Regulations, 28 CFR Part 36 (*Nondiscrimination on the basis of disability... Final Rule*). Section 36.304 of this regulation, which covers barrier removal, should be reviewed before this survey is conducted.

However, keep in mind that full compliance with the Standards is required only for new construction and alterations. The requirements are presented here as a guide to help you determine what may be readily achievable barrier removal for existing facilities. The Standards should be followed for all barrier removal unless doing so is not readily achievable. If complying with the Standards is not readily achievable, you may undertake a modification that does not fully comply, as long as it poses no health or safety risk.

In addition to the technical specifications, each item has a scoping provision, which can be found under Section 4.1 in the Standards. This section clarifies when access is required and what the exceptions may be.

Each state has its own regulations regarding accessibility. To ensure compliance with all codes, know your state and local codes and use the more stringent technical requirement for every modification you make; that is, the requirement that provides greater access for individuals with disabilities. The barrier removal requirement for existing facilities is new under the ADA and supersedes less stringent local or state codes.

What This Checklist is Not

This checklist does not cover all of the requirements of the Standards; therefore, it is not for facilities undergoing new construction or alterations. In addition, it does not attempt to illustrate all possible barriers or propose all possible barrier removal solutions. The Standards should be consulted for guidance in situations not covered here.

The Title III regulation covers more than barrier removal, but this checklist does not cover Title III's requirements for nondiscriminatory policies and practices and for the provision of auxiliary communication aids and services. The communication features covered are those that are structural in nature.

Priorities

This checklist is based on the four priorities recommended by the Title III regulations for planning readily achievable barrier removal projects:

Priority 1: Accessible approach and entrance
Priority 2: Access to goods and services
Priority 3: Access to rest rooms
Priority 4: Any other measures necessary

Note that the references to ADAAG throughout the checklist refer to the Standards for Accessible Design.

How to Use This Checklist

✓ **Get Organized:** Establish a time frame for completing the survey. Determine how many copies of the checklist you will need to survey the whole facility. Decide who will conduct the survey. It is strongly recommended that you invite two or three additional people, including people with various disabilities and accessibility expertise, to assist in identifying barriers, developing solutions for removing these barriers, and setting priorities for implementing improvements.

✓ **Obtain Floor Plans:** It is very helpful to have the building floor plans with you while you survey. If plans are not available, use graph paper to sketch the layout of all interior and exterior spaces used by your organization. Make notes on the sketch or plan while you are surveying.

✓ **Conduct the Survey:** Bring copies of this checklist, a clipboard, a pencil or pen, and a flexible steel tape measure. With three people surveying, one person numbers key items on the floor plan to match with the field notes, taken by a second person, while the third takes measurements. ***Be sure to record all dimensions!*** As a reminder, questions that require a dimension to be measured and recorded are marked with the ruler symbol. Think about each space from the perspective of people with physical, hearing, visual, and cognitive disabilities, noting areas that need improvement.

✓ **Summarize Barriers and Solutions:** List barriers found and ideas for their removal. Consider the solutions listed beside each question, and add your own ideas. Consult with building contractors and equipment suppliers to estimate the costs for making the proposed modifications.

✓ **Make Decisions and Set Priorities:** Review the summary with decision makers and advisors. Decide which solutions will best eliminate barriers at a reasonable cost. Prioritize the items you decide upon and make a timeline for carrying them out. Where the removal of barriers is not readily achievable, you must consider whether there are alternative methods for providing access that *are* readily achievable.

✓ **Maintain Documentation:** Keep your survey, notes, summary, record of work completed, and plans for alternative methods on file.

✓ **Make Changes:** Implement changes as planned. Always refer directly to the Standards and your state and local codes for complete technical requirements before making any access improvement. References to the applicable sections of the Standards are listed at the beginning of each group of questions. If you need help understanding the federal, state, or local requirements, contact your Disability and Business Technical Assistance Center.

✓ **Follow Up:** Review your Implementation Plan each year to re-evaluate whether more improvements have become readily achievable.

To obtain a copy of the Title III regulations and the Standards or other technical information, call the U.S. Dept. of Justice ADA Information Line at (800) 514-0301 Voice, (202) 514-0381 TDD, or (800) 514-0383 TDD. For questions about ADAAG, contact the Architectural and Transportation Barriers Compliance Board at (800) USA-ABLE.

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Priority **1** **Accessible Approach/Entrance** People with disabilities should be able to arrive on the site, approach the building, and enter as freely as everyone else. At least one route of travel should be safe and accessible for everyone, including people with disabilities.			
Route of Travel (ADAAG 4.3, 4.4, 4.5, 4.7) Is there a route of travel that does not require the use of stairs?	☐	☐	☐ Add a ramp if the route of travel is interrupted by stairs. ☐ Add an alternative route on level ground.
Is the route of travel stable, firm and slip-resistant?	☐	☐	☐ Repair uneven paving. ☐ Fill small bumps and breaks with beveled patches. ☐ Replace gravel with hard top.
Is the route at least 36 inches wide? ☐☐ width			☐ Change or move landscaping, furnishings, or other features that narrow the route of travel. ☐ Widen route.
Can all objects protruding into the circulation paths be detected by a person with a visual disability using a cane? ☐☐ distance from wall/ height In order to be detected using a cane, an object must be within 27 inches of the ground. Objects hanging or mounted overhead must be higher than 80 inches to provide clear head room. It is not necessary to remove objects that protrude less than 4 inches from the wall.			☐ Move or remove protruding objects. ☐ Add a cane-detectable base that extends to the ground. ☐ Place a cane-detectable object on the ground underneath as a warning barrier.
Do curbs on the route have curb cuts at drives, parking, and drop-offs?	☐	☐	☐ Install curb cut. ☐ Add small ramp up to curb.
Ramps (ADAAG 4.8) Are the slopes of ramps no greater than 1:12? ☐☐ slope Slope is given as a ratio of the height to the length. 1:12 means for every 12 inches along the base of the ramp, the height increases one inch. For a 1:12 maximum slope, at least one foot of ramp length is needed for each inch of height.			☐ Lengthen ramp to decrease slope. ☐ Relocate ramp. ☐ If available space is limited, reconfigure ramp to include switchbacks.

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Ramps, continued Do all ramps longer than 6 feet have railings on both sides?	☐	☐	☐ Add railings.
Are railings sturdy, and between 34 and 38 inches high?	☐	☐	☐ Adjust height of railing if not between 30 and 38 inches. ☐ Secure handrails in fixtures.
	height		
Is the width between railings or curbs at least 36 inches?	☐	☐	☐ Relocate the railings. ☐ Widen the ramp.
	width		
Are ramps non-slip?	☐	☐	☐ Add non-slip surface material.
Is there a 5-foot-long level landing at every 30-foot horizontal length of ramp, at the top and bottom of ramps and at switchbacks?	☐	☐	☐ Remodel or relocate ramp.
	length		
Does the ramp rise no more than 30 inches between landings?	☐	☐	☐ Remodel or relocate ramp.
	rise		
Parking and Drop-Off Areas (ADAAG 4.6) Are an adequate number of accessible parking spaces available (8 feet wide for car plus 5-foot access aisle)? For guidance in determining the appropriate number to designate, the table below gives the ADAAG requirements for new construction and alterations (for lots with more than 100 spaces, refer to ADAAG): **Total spaces** — **Accessible** 1 to 25 — 1 space 26 to 50 — 2 spaces 51 to 75 — 3 spaces 76 to 100 — 4 spaces	☐	☐	☐ Reconfigure a reasonable number of spaces by repainting stripes.
	number of accessible spaces		
	Note widths of existing accessible spaces:		
Are 8-foot-wide spaces, with minimum 8-foot-wide access aisles, and 98 inches of vertical clearance, available for lift-equipped vans? **At least one of every 8 accessible spaces** must be van-accessible (with a minimum of one van-accessible space in all cases).	☐	☐	☐ Reconfigure to provide van-accessible space(s).
	width/ vertical clearance		

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Parking and Drop-Off Areas, continued			
Are the access aisles part of the accessible route to the accessible entrance?	☐	☐	☐ Add curb ramps. ☐ Reconstruct sidewalk.
Are the accessible spaces closest to the accessible entrance?	☐	☐	☐ Reconfigure spaces.
Are accessible spaces marked with the International Symbol of Accessibility? Are there signs reading "Van Accessible" at van spaces?	☐	☐	☐ Add signs, placed so that they are not obstructed by cars.
Is there an enforcement procedure to ensure that accessible parking is used only by those who need it?	☐	☐	☐ Implement a policy to check periodically for violators and report them to the proper authorities.
Entrance (ADAAG 4.13, 4.14, 4.5)			
If there are stairs at the main entrance, is there also a ramp or lift, or is there an alternative accessible entrance? **Do not use a service entrance as the accessible entrance** unless there is no other option.	☐	☐	☐ If it is not possible to make the main entrance accessible, create a dignified alternate accessible entrance. If parking is provided, make sure there is accessible parking near all accessible entrances.
Do all inaccessible entrances have signs indicating the location of the nearest accessible entrance?	☐	☐	☐ Install signs before inaccessible entrances so that people do not have to retrace the approach.
Can the alternate accessible entrance be used independently?	☐	☐	☐ Eliminate as much as possible the need for assistance—to answer a doorbell, to operate a lift, or to put down a temporary ramp, for example.
Does the entrance door have at least 32 inches clear opening (for a double door, at least one 32-inch leaf)?	☐	☐	☐ Widen the door to 32 inches clear. ☐ If technically infeasible, widen to 31-3/8 inches minimum. ☐ Install offset (swing-clear) hinges.
Is there at least 18 inches of clear wall space on the pull side of the door, next to the handle? **A person using a wheelchair** or crutches needs this space to get close enough to open the door.	☐	☐	☐ Remove or relocate furnishings, partitions, or other obstructions. ☐ Move door. ☐ Add power-assisted or automatic door opener.

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Entrance, continued			
Is the threshold edge 1/4-inch high or less, or if beveled edge, no more than 3/4-inch high?	☐	☐ height	☐ If there is a single step with a rise of 6 inches or less, add a short ramp. ☐ If there is a threshold greater than 3/4-inch high, remove it or modify it to be a ramp.
If provided, are carpeting or mats a maximum of 1/2-inch high?	☐	☐ height	☐ Replace or remove mats.
Are edges securely installed to minimize tripping hazards?	☐	☐	☐ Secure carpeting or mats at edges.
Is the door handle no higher than 48 inches and operable with a closed fist? **The "closed fist" test for handles and controls:** Try opening the door or operating the control using only one hand, held in a fist. If you can do it, so can a person who has limited use of his or her hands.	☐	☐ height	☐ Lower handle. ☐ Replace inaccessible knob with a lever or loop handle. ☐ Retrofit with an add-on lever extension.
Can doors be opened without too much force (exterior doors reserved; maximum is 5 lbf for *interior* doors)? **You can use an inexpensive force meter or a fish scale** to measure the force required to open a door. Attach the hook end to the doorknob or handle. Pull on the ring end until the door opens, and read off the amount of force required. If you do not have a force meter or a fish scale, you will need to judge subjectively whether the door is easy enough to open.	☐	☐ force	☐ Adjust the door closers and oil the hinges. ☐ Install power-assisted or automatic door openers. ☐ Install lighter doors.
If the door has a closer, does it take at least 3 seconds to close?	☐	☐ seconds	☐ Adjust door closer.

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Priority ❷ **Access to Goods and Services** Ideally, the layout of the building should allow people with disabilities to obtain materials or services without assistance.			
Horizontal Circulation (ADAAG 4.3) Does the accessible entrance provide direct access to the main floor, lobby, or elevator?	☐	☐	☐ Add ramps or lifts. ☐ Make another entrance accessible.
Are all public spaces on an accessible route of travel?	☐	☐	☐ Provide access to all public spaces along an accessible route of travel.
Is the accessible route to all public spaces at least 36 inches wide?	☐	☐ width	☐ Move furnishings such as tables, chairs, display racks, vending machines, and counters to make more room.
Is there a 5-foot circle or a T-shaped space for a person using a wheelchair to reverse direction?	☐	☐ width	☐ Rearrange furnishings, displays, and equipment.
Doors (ADAAG 4.13) Do doors into public spaces have at least a 32-inch clear opening?	☐	☐ clear opening	☐ Install offset (swing-clear) hinges. ☐ Widen doors.
On the pull side of doors, next to the handle, is there at least 18 inches of clear wall space so that a person using a wheelchair or crutches can get near to open the door?	☐	☐ clear space	☐ Reverse the door swing if it is safe to do so. ☐ Move or remove obstructing partitions.
Can doors be opened without too much force (5 lbf maximum for interior doors)?	☐	☐ force	☐ Adjust or replace closers. ☐ Install lighter doors. ☐ Install power-assisted or automatic door openers.
Are door handles 48 inches high or less and operable with a closed fist?	☐	☐ height	☐ Lower handles. ☐ Replace inaccessible knobs or latches with lever or loop handles. ☐ Retrofit with add-on levers. ☐ Install power-assisted or automatic door openers.
Are all threshold edges 1/4-inch high or less, or if beveled edge, no more than 3/4-inch high?	☐	☐ height	☐ If there is a threshold greater than 3/4-inch high, remove it or modify it to be a ramp. ☐ If between 1/4- and 3/4-inch high, add bevels to both sides.

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Rooms and Spaces (ADAAG 4.2, 4.4, 4.5)			
Are all aisles and pathways to materials and services at least 36 inches wide?	☐	☐ width	☐ Rearrange furnishings and fixtures to clear aisles.
Is there a 5-foot circle or T-shaped space for turning a wheelchair completely?	☐	☐ width	☐ Rearrange furnishings to clear more room.
Is carpeting low-pile, tightly woven, and securely attached along edges?	☐	☐	☐ Secure edges on all sides. ☐ Replace carpeting.
In circulation paths through public areas, are all obstacles cane-detectable (located within 27 inches of the floor or higher than 80 inches, or protruding less than 4 inches from the wall)?	☐	☐ height/ protrusion	☐ Remove obstacles. ☐ Install furnishings, planters, or other cane-detectable barriers underneath.
Emergency Egress (ADAAG 4.28)			
If emergency systems are provided, do they have both flashing lights and audible signals?	☐	☐	☐ Install visible and audible alarms. ☐ Provide portable devices.
Signage for Goods and Services (ADAAG 4.30)			
Different requirements apply to different types of signs. →			
If provided, do signs and room numbers designating permanent rooms and spaces where goods and services are provided comply with the appropriate requirements for such signage?	☐	☐	☐ Provide signs that have raised letters, Grade II Braille, and that meet all other requirements for permanent room or space signage. (See ADAAG 4.1.3(16) and 4.30.)
	Y	N	
• Signs mounted with centerline 60 inches from floor.	☐	☐ height	
• Mounted on wall adjacent to latch side of door, or as close as possible.	☐	☐	
• Raised characters, sized between 5/8 and 2 inches high, with high contrast (for room numbers, rest rooms, exits).	☐	☐ character height	
• Brailled text of the same information.	☐	☐	
• If pictogram is used, it must be accompanied by raised characters and braille.	☐	☐	

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Directional and Informational Signage The following questions apply to directional and informational signs that fall under Priority 2.			
If mounted above 80 inches, do they have letters at least 3 inches high, with high contrast, and non-glare finish?	☐	☐ letter height	☐ Review requirements and replace signs as needed, meeting the requirements for character size, contrast, and finish.
Do directional and informational signs comply with legibility requirements? (Building directories or temporary signs need not comply.)	☐	☐	☐ Review requirements and replace signs as needed.
Controls (ADAAG 4.27) Are all controls that are available for use by the public (including electrical, mechanical, cabinet, game, and self-service controls) located at an accessible height? **Reach ranges:** The maximum height for a side reach is 54 inches; for a forward reach, 48 inches. The minimum reachable height is 15 inches for a front approach and 9 inches for a side approach.	☐	☐ height	☐ Relocate controls.
Are they operable with a closed fist?	☐	☐	☐ Replace controls.
Seats, Tables, and Counters (ADAAG 4.2, 4.32, 7.2) Are the aisles between fixed seating (other than assembly area seating) at least 36 inches wide?	☐	☐ width	☐ Rearrange chairs or tables to provide 36-inch aisles.
Are the spaces for wheelchair seating distributed throughout?	☐	☐	☐ Rearrange tables to allow room for wheelchairs in seating areas throughout the area. ☐ Remove some fixed seating.
Are the tops of tables or counters between 28 and 34 inches high?	☐	☐ height	☐ Lower part or all of high surface. ☐ Provide auxiliary table or counter.
Are knee spaces at accessible tables at least 27 inches high, 30 inches wide, and 19 inches deep?	☐	☐ height/ width/ depth	☐ Replace or raise tables.

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Seats, Tables, and Counters, continued			
At each type of cashier counter, is there a portion of the main counter that is no more than 36 inches high?	☐	☐ height	☐ Provide a lower auxiliary counter or folding shelf. ☐ Arrange the counter and surrounding furnishings to create a space to hand items back and forth.
Is there a portion of food-ordering counters that is no more than 36 inches high, or is there space at the side for passing items to customers who have difficulty reaching over a high counter?	☐	☐ height	☐ Lower section of counter. ☐ Arrange the counter and surrounding furnishings to create a space to pass items.
Vertical Circulation (ADAAG 4.1.3(5), 4.3) Are there ramps, lifts, or elevators to all public levels?	☐	☐	☐ Install ramps or lifts. ☐ Modify a service elevator. ☐ Relocate goods or services to an accessible area.
On each level, if there are stairs between the entrance and/or elevator and essential public areas, is there an accessible alternate route?	☐	☐	☐ Post clear signs directing people along an accessible route to ramps, lifts, or elevators.
Stairs (ADAAG 4.9) The following questions apply to stairs connecting levels *not* serviced by an elevator, ramp, or lift.			
Do treads have a non-slip surface?	☐	☐	☐ Add non-slip surface to treads.
Do stairs have continuous rails on both sides, with extensions beyond the top and bottom stairs?	☐	☐	☐ Add or replace handrails if possible within existing floor plan.
Elevators (ADAAG 4.10) Are there both visible and verbal or audible door opening/closing and floor indicators (one tone = up, two tones = down)?	☐	☐	☐ Install visible and verbal or audible signals.
Are the call buttons in the hallway no higher than 42 inches?	☐	☐ height	☐ Lower call buttons. ☐ Provide a permanently attached reach stick.
Do the controls inside the cab have raised and braille lettering?	☐	☐	☐ Install raised lettering and braille next to buttons.

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Elevators, continued			
Is there a sign on both door jambs at every floor identifying the floor in raised and braille letters?	☐	☐	☐ Install tactile signs to identify floor numbers, at a height of 60 inches from floor.
If an emergency intercom is provided, is it usable without voice communication?	☐	☐	☐ Modify communication system.
Is the emergency intercom identified by braille and raised letters?	☐	☐	☐ Add tactile identification.
Lifts (ADAAG 4.2, 4.11) Can the lift be used without assistance? If not, is a call button provided?	☐	☐	☐ At each stopping level, post clear instructions for use of the lift. ☐ Provide a call button.
Is there at least 30 by 48 inches of clear space for a person in a wheelchair to approach to reach the controls and use the lift?	☐	☐	☐ Rearrange furnishings and equipment to clear more space.
	clear space		
Are controls between 15 and 48 inches high (up to 54 inches if a side approach is possible)?	☐	☐	☐ Move controls.
	height		

Priority

❸ Usability of Rest Rooms

When rest rooms are open to the public, they should be accessible to people with disabilities.

Getting to the Rest Rooms (ADAAG 4.1) If rest rooms are available to the public, is at least one rest room (either one for each sex, or unisex) fully accessible?	☐	☐	☐ Reconfigure rest room. ☐ Combine rest rooms to create one unisex accessible rest room.
Are there signs at inaccessible rest rooms that give directions to accessible ones?	☐	☐	☐ Install accessible signs.
Doorways and Passages (ADAAG 4.2, 4.13, 4.30) Is there tactile signage identifying rest rooms?	☐	☐	☐ Add accessible signage, placed to the side of the door, 60 inches to centerline (not on the door itself).
Mount signs on the wall, on the latch side of the door, complying with the requirements for permanent signage.			

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Doorways and Passages, continued Are pictograms or symbols used to identify rest rooms, and, if used, are raised characters and braille included below them?	☐	☐	☐ If symbols are used, add supplementary verbal signage with raised characters and braille below pictogram symbol
Is the doorway at least 32 inches clear?	☐ ☐ clear width		☐ Install offset (swing-clear) hinges. ☐ Widen the doorway.
Are doors equipped with accessible handles (operable with a closed fist), 48 inches high or less?	☐ ☐ height		☐ Lower handles. ☐ Replace knobs or latches with lever or loop handles. ☐ Add lever extensions. ☐ Install power-assisted or automatic door openers.
Can doors be opened easily (5 lbf maximum force)?	☐ ☐ force		☐ Adjust or replace closers. ☐ Install lighter doors. ☐ Install power-assisted or automatic door openers.
Does the entry configuration provide adequate maneuvering space for a person using a wheelchair? **A person in a wheelchair** needs 36 inches of clear width for forward movement, and a 5-foot diameter or T-shaped clear space to make turns. A minimum distance of 48 inches clear of the door swing is needed between the two doors of an entry vestibule.	☐ ☐ clear width		☐ Rearrange furnishings such as chairs and trash cans. ☐ Remove inner door if there is a vestibule with two doors. ☐ Move or remove obstructing partitions.
Is there a 36-inch-wide path to all fixtures?	☐ ☐ width		☐ Remove obstructions.
Stalls (ADAAG 4.17) Is the stall door operable with a closed fist, inside and out?	☐ ☐		☐ Replace inaccessible knobs with lever or loop handles. ☐ Add lever extensions.
Is there a wheelchair-accessible stall that has an area of at least 5 feet by 5 feet, clear of the door swing, OR is there a stall that is less accessible but that provides greater access than a typical stall (either 36 by 69 inches or 48 by 69 inches)?	☐ ☐ length/ width		☐ Move or remove partitions. ☐ Reverse the door swing if it is safe to do so.

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Stalls, continued In the accessible stall, are there grab bars behind and on the side wall nearest to the toilet?	☐	☐	☐ Add grab bars.
Is the toilet seat 17 to 19 inches high?	☐ ☐ height		☐ Add raised seat.
Lavatories (ADAAG 4.19, 4.24) Does one lavatory have a 30-inch-wide by 48-inch-deep clear space in front? **A maximum of 19 inches of the required depth may be under the lavatory.**	☐ ☐ clear space		☐ Rearrange furnishings. ☐ Replace lavatory. ☐ Remove or alter cabinetry to provide space underneath. ☐ Make sure hot pipes are covered. ☐ Move a partition or wall.
Is the lavatory rim no higher than 34 inches?	☐ ☐ height		☐ Adjust or replace lavatory.
Is there at least 29 inches from the floor to the bottom of the lavatory apron (excluding pipes)?	☐ ☐ height		☐ Adjust or replace lavatory.
Can the faucet be operated with one closed fist?	☐	☐	☐ Replace with paddle handles.
Are soap and other dispensers and hand dryers within reach ranges (see page 7) and usable with one closed fist?	☐	☐	☐ Lower dispensers. ☐ Replace with or provide additional accessible dispensers.
Is the mirror mounted with the bottom edge of the reflecting surface 40 inches high or lower?	☐ ☐ height		☐ Lower or tilt down the mirror. ☐ Add a larger mirror anywhere in the room.
Priority **❹ Additional Access** *Note that this priority is for items not required for basic access in the first three priorities.* When amenities such as drinking fountains and public telephones are provided, they should also be accessible to people with disabilities.			
Drinking Fountains (ADAAG 4.15) Is there at least one fountain with clear floor space of at least 30 by 48 inches in front?	☐ ☐ clear space		☐ Clear more room by rearranging or removing furnishings.

QUESTIONS	Yes	No	POSSIBLE SOLUTIONS
Drinking Fountains, continued			
Is there one fountain with its spout no higher than 36 inches from the ground, and another with a standard height spout (or a single "hi-lo" fountain)?	☐	☐ height	☐ Provide cup dispensers for fountains with spouts that are too high. ☐ Provide accessible cooler.
Are controls mounted on the front or on the side near the front edge, and operable with one closed fist?	☐	☐	☐ Replace the controls.
Is each water fountain cane-detectable (located within 27 inches of the floor or protruding into the circulation space less than 4 inches from the wall?	☐	☐ height/ protrusion	☐ Place a planter or other cane-detectable barrier on each side at floor level.
Telephones (ADAAG 4.31)			
If pay or public use phones are provided, is there clear floor space of at least 30 by 48 inches in front of at least one?	☐	☐ clear space	☐ Move furnishings. ☐ Replace booth with open station.
Is the highest operable part of the phone no higher than 48 inches (up to 54 inches if a side approach is possible)?	☐	☐ height	☐ Lower telephone.
Does the phone protrude no more than 4 inches into the circulation space?	☐	☐ protrusion	☐ Place a cane-detectable barrier on each side at floor level.
Does the phone have push-button controls?	☐	☐	☐ Contact phone company to install push-buttons.
Is the phone hearing-aid compatible?	☐	☐	☐ Have phone replaced with a hearing-aid compatible one.
Is the phone adapted with volume control?	☐	☐	☐ Have volume control added.
Is the phone with volume control identified with appropriate signage?	☐	☐	☐ Add signage.
If there are four or more public phones in the building, is one of the phones equipped with a text telephone (TT or TDD)?	☐	☐	☐ Install a text telephone. ☐ Have a portable TT available. ☐ Provide a shelf and outlet next to phone.
Is the location of the text telephone identified by accessible signage bearing the International TDD Symbol?	☐	☐	☐ Add signage.

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